

Utah's Division of Child and Family Services

Eastern Region Report

Qualitative Case Review Findings

Review Conducted April 15-19, 2002

*A Joint Report by
The Child Welfare Policy and Practice Group
and
The Office of Services Review, Department of Human Services*

August 29, 2002

Table of Contents

I.	Introduction	1
II.	Practice Principles and Standards.....	1
III.	The Qualitative Case Review Process	3
IV.	System Strengths	7
V.	Characteristics of the Eastern Region.....	8
VI.	Stakeholder Observations.....	8
VII.	System Performance Analysis, Trends, and Practice Improvement Needs	10
VIII.	Recommendations for Practice Improvement	34
	Appendix--Milestone Trend Indicators	A-1

I. Introduction

The Division of Child and Family Services (the Division) completed a comprehensive plan for the delivery of services to families and children in May 1999, entitled The Performance Milestone Plan (the Plan) pursuant to an order issued by United States District Court Judge Tena Campbell. On October 18, 1999, Judge Campbell issued an order directing the Division as follows:

- The Plan shall be implemented.
- The Child Welfare Policy and Practice Group (the Child Welfare Group) shall remain as monitor of the Division's implementation of the Plan.

The Plan provides for four monitoring processes. Those four processes are: a review of a sample of Division case records for compliance with case process requirements, a review of the achievement of action steps identified in the Plan, a review of outcome indicator trends, and, specific to the subject of this report, a review of the quality of actual case practice. The review of case practice assesses the performance of the Division's regions in achieving practice consistent with the practice principles and practice standards expressed in the Plan, as measured by the Qualitative Case Review (QCR) process.

The Plan provides for the QCR process to be employed as one method of assessing frontline practice for purposes of demonstrating performance sufficient for exit from the David C. Settlement Agreement and court jurisdiction. Related to exit from qualitative practice provisions, the Division must achieve the following in each region in two consecutive reviews:

- 85% of cases attain an acceptable score on the child and family status scale.
- 85% of cases attain an acceptable score on the system performance scale, with core domains attaining at least a rating of 70%.

The Plan anticipates that reports on the Division's performance, where possible, will be issued jointly by the Child Welfare Group and the Division, consistent with the intent of the monitor and the Division to make the monitoring process organic to the agency's self-evaluation and improvement efforts.

II. Practice Principles and Standards

In developing the Plan, the Division adopted a framework of practice, embodied in a set of practice principles and standards. The training, policies, and other system improvement strategies addressed in the Plan, the outcome indicators to be tracked, the case process tasks to be reviewed, and the practice quality elements to be evaluated through the QCR process all reflect these practice principles and standards. They are listed below:

Protection	Development	Permanency
Cultural Responsiveness	Family Foundation	Partnerships
Organizational Competence	Treatment Professionals	

In addition to these principles or values, the Division has express standards of practice that serve both as expectations and as actions to be evaluated. The following introduction and list is quoted directly from the Plan.

Though they are necessary to give appropriate direction and to instill significance in the daily tasks of child welfare staff, practice principles cannot stand alone. In addition to practice principles, the organization has to provide for discrete actions that flow from the principles. The following list of discrete actions, or practice standards, have been derived from national practice standards as compiled by the CWPPG, and have been adapted to the performance expectations that have been developed by DCFS. These practice standards must be consistently performed for DCFS to meet the objectives of its mission and to put into action the above practice principles. These standards bring real-life situations to the practice principles and will be addressed in the Practice Model development and training.

- 1. Children who are neglected or abused have immediate and thorough assessments leading to decisive, quick remedies for the immediate circumstances, followed by long-range planning for permanency and well-being.*
- 2. Children and families are actively involved in identifying their strengths and needs and in matching services to identified needs.*
- 3. Service plans and services are based on an individualized service plan, using a family team (including the family, where possible and appropriate, and key support systems and providers), employing a comprehensive assessment of the child and family's needs, and attending to and utilizing the strengths of the child and his/her family strengths.*
- 4. Individualized plans include specific steps and services to reinforce identified strengths and meet the needs of the family. Plans should specify steps to be taken by each member of the team, time frames for accomplishment of goals, and concrete actions for monitoring the progress of the child and family.*
- 5. Service planning and implementation are built on a comprehensive array of services designed to permit children and families to achieve the goals of safety, permanence and well-being.*
- 6. Children and families receive individualized services matched to their strengths and needs and, where required, services should be created to respond to those needs.*

7. *Critical decisions about children and families, such as service plan development and modification, removal, placement and permanency, are, whenever possible, to be made by a team including the child and his/her family, the family's informal helping systems, foster parents, and formal agency stakeholders.*
8. *Services provided to children and families respect their cultural, ethnic, and religious heritage.*
9. *Services are provided in the home and neighborhood-based settings that are most appropriate for the child and family's needs.*
10. *Services are provided in the least restrictive, most normalized settings appropriate for the child and family's needs.*
11. *Siblings are to be placed together. When this is not possible or appropriate, siblings should have frequent opportunities for visits.*
12. *Children are placed in close proximity to their family and have frequent opportunities for visits.*
13. *Children in placement are provided with the support needed to permit them to achieve their educational and vocational potential with the goal of becoming self-sufficient adults.*
14. *Children receive adequate, timely medical and mental health care that is responsive to their needs.*
15. *Services are provided by competent staff and providers who are adequately trained and who have workloads at a level that permit practice consistent with these principles.*

III. The Qualitative Case Review Process

Historically, most efforts at evaluating and monitoring human services, such as child welfare, made extensive, if not exclusive, use of methods adapted from business and finance. Virtually all of the measurements were quantitative and involved auditing processes: counting activities, checking records, and determining if deadlines were met. Historically, this was the approach during the first four years of compliance monitoring in the David C. Settlement Agreement. While the case process record review does provide meaningful information about accomplishment of tasks, it is at best incomplete in providing information that permits meaningful practice improvement.

Over the past decade there has been a significant shift away from exclusive reliance on quantitative process oriented audits and toward increasing inclusion of qualitative approaches to evaluation and monitoring. A focus on quality assurance and continuous quality improvement has begun to find increasing favor, not only in business and in industry, but also in health care and human services.

The reason for the rapid ascent of the “quality movement” is simple: it not only can identify problems, it can help solve them. For example, a qualitative review may not only identify a deficiency in service plans, but may also point to why the deficiency exists and what can be done to improve the plans. By focusing on the critical outcomes and the essential system performance to achieve those outcomes, attention begins to shift to questions that provide richer, more useful information. This is especially helpful when developing priorities for practice improvement efforts. Some examples of the two approaches may be helpful:

AUDIT FOCUS:

“Is there a current service plan in the file?”

QUALITATIVE FOCUS:

“Is the service plan relevant to the needs and goals, and coherent in the selection and assembly of strategies, supports, services, and timelines offered?”

AUDIT FOCUS:

“Was the permanency goal presented to the court at the dispositional hearing?”

QUALITATIVE FOCUS:

“To what degree are the implementation of services and results of the child and family service plan routinely monitored, evaluated, and modified to create a self-correcting and effective service process?”

The QCR process is based on the Service Testing™ model developed by Human System and Outcomes, Inc., which evolved from collaborative work with the State of Alabama, designed to monitor the R. C. Consent Decree. The Service Testing™ model has been specifically adapted for use in implementing the Plan by the Division and by the court monitor, the Child Welfare Group, based on the Child Welfare Group’s experience in supporting improvements in child welfare outcomes in 11 states. Service Testing™ represents the current state of the art in evaluating and monitoring human services, such as child welfare. It is meant to be used in concert with other sources of information, such as record reviews and interviews with staff, community stakeholders, and providers.

The Utah QCR process made use of a case review protocol adapted for use in Utah from protocols used in 11 other states. The protocol is not a traditional measurement designed with specific psychometric properties. The QCR protocol guides a series of structured interviews with key sources such as children, parents, teachers, foster parents, Mental Health providers, caseworkers, and others to support professional appraisals in two broad domains: Child and Family Status and System Performance. The appraisal of the professional reviewer examining

Eastern Region Report

each case is translated to a judgment of acceptability for each category of functioning and system performance reviewed using a six-point scale ranging from “Completely Unacceptable” to “Optimally Acceptable.” The judgment is quantified and combined with all other case scores to produce overall system scores.

The Utah QCR instrument assesses child and family status issues and system performance in the following discrete categories. Because some of these categories reflect the most important outcomes (Child and Family Status) and areas of system functioning (System Performance) that are most closely linked to critical outcomes, the scoring of the review involves differential weighting of categories. For example, the weight given permanence is higher than for caregiver functioning. Likewise, the weight given functional assessment is higher than the weight for successful transitions. These weights, applied when cases are scored, affect the overall score of each case. The weight for each category is reflected parenthetically next to each item.

Child and Family Status	System Performance
Child Safety (x3)	Child/Family Participation (x2)
Stability (x2)	Team/Coordination (x2)
Appropriateness of Placement (x2)	Functional Assessment (x3)
Prospects for Permanence (x3)	Long-Term View (x2)
Health/Physical Well-Being (x3)	Child and Family Planning (x3)
Emotional/Behavioral Well-Being (x3)	Plan Implementation (x2)
Learning Progress/Development (x2)	Supports/Services (x2)
Caregiver Functioning (x2)	Successful Transitions (x1)
Family Functioning/Resourcefulness (x1)	Effective Results (x2)
Satisfaction (x1)	Tracking Adaptation (x3)
Overall Status	Caregiver Support (x1)
	Overall System Performance

The fundamental assumption of the Service Testing™ model is that each case is a unique and valid test of the system. This is true in the same sense that each person who needs medical attention is a unique and valid test of the health care system. It does not assume that each person needs the same medical care, or that the health care system will be equally successful with every patient. It simply means that every patient is important and that what happens to that individual patient matters. It is little consolation to that individual that the type of care they receive is usually successful. This point becomes most critical in child welfare when children are currently, or have recently been, at risk of serious harm. Nowhere in the child welfare system is the unique validity of individual cases clearer than the matter of child safety.

Service Testing™, by aggregating the systematically collected information on individual cases, provides both quantitative and qualitative results that reveal in rich detail what it is like to be a consumer of services and how the system is performing for children and families. The findings of the QCR will be presented in the form of aggregated information. These are brief summaries written at the conclusion of the set of interviews done for each case. They are provided only as illustrations to put a “human face” on issues of concern.

Methodology

Cases reviewed were randomly selected from the universe of the case categories of out-of-home, Protective Family Preservation (PFP) services, Protective Services Supervision (PSS), and Protective Service Counseling (PSC) in the region. These randomly selected cases were then inserted into a simple matrix designed to ensure that critical facets of the Division population are represented with reasonable accuracy. These variables stratified the sample to insure that there was a representative mix of cases of children in out-of-home care and in their own homes. For children in out-of-home care, the sample was further stratified to assure that children in a variety of settings (family foster care, group care, and therapeutic foster care) were selected. Cases were also distributed to permit each office in the region to be reviewed and to assure that no worker had more than one of his/her cases reviewed. An additional number of cases were selected to serve as replacement cases, which are a pool of cases used to substitute for cases that could not be reviewed because of worker or family circumstances (illness, lack of family consent, etc).

The sample thus assured that:

- Males and females were represented.
- Younger and older children were represented.
- Newer and older cases were represented.
- Larger and smaller offices were represented.

A total of 24 cases were selected for the review, and 24 cases were reviewed.

Reviewers

The Child Welfare Group qualitative reviewers included professionals with extensive experience in child welfare and child mental health. Most of the reviewers had experience in the Alabama child welfare reform, as well as other reform and practice improvement initiatives around the United States. The Child Welfare Group has employed the QCR process in 11 different states. Utah reviewers “shadowed” the Child Welfare Group reviewers as a part of the reviewer certification process. These reviewers, once certified, will become reviewers themselves and will participate in subsequent reviews. The Eastern Region review included both Child Welfare Group and Utah reviewers in lead reviewer roles.

Stakeholder Interviewers

As a compliment to the individual case reviews, the Child Welfare Group staff and Utah staff interviewed key local system leaders from other child and family serving agencies and organizations in the region about system issues, performance, assets, and barriers. These external perspectives provide a valuable source of perspective, insight, and feedback about the performance of Utah’s child welfare system. In addition, focus groups were conducted with Division staff and supervisors in various offices throughout the region. Observations from the stakeholder interviews and focus groups are briefly described in a separate section.

IV. System Strengths

In the course of the review, many system strengths were observed in individual case practice. Not all of the listed strengths were observed in every case reviewed, but each strength observed provides a cue about practice improvement. The system strengths observed are listed below.

- Family team meetings are being held.
- Families are involved and choosing their team.
- Multiple family team meetings have been held in some cases.
- Many professionals were impressed with the meetings and found them useful/helpful.
- Some family team meetings are starting at CPS intervention.
- Family team meetings are beginning to become a normal routine.
- Functional assessments are done, and are updated after meetings.
- Caseworker sees children regularly, even though travel distances are long.
- Caseworkers are looking for solutions.
- Stakeholders are seeing improvements in their working relationship with the Division.
- There were good examples of tracking and adaptation, even changing providers if needed.
- Plans are being individualized and adapted -- addendums are being made to existing plans.
- There are examples of some highly individualized plans.
- Services for extended family are provided from the beginning of some cases.
- Creative visitation plans are implemented; traveling a long way to maintain sibling visits.
- Some good safety plans were observed.
- Work is being done to maintain sibling bonds.
- Supervisors are mentoring new caseworkers on how to do team meetings and how to use Practice Model Principles.
- There are excellent working relationships with some Native American tribal agencies.
- Permanency is being achieved within required timeframes for many cases.
- There is respect and cooperation between community partners and the Division.
- Some child and family team meetings are being used to address long-term view issues.
- Examples of good caseworker advocacy for clients were observed.
- Foster parents are often respected and thoroughly engaged.
- Foster parents are willing to work with birth parents and siblings (and the reverse).
- Youth in Custody (YIC) program is working well with some children to address special needs.
- Good supports for kinship placements were observed.
- Many committed caseworkers were observed to “go the extra mile.”

V. Characteristics of the Eastern Region

Trend Indicators for the Eastern Region

The Division provided regional trend data for the past five quarters prior to the review. The tables of trend indicators for the Eastern Region, along with those of the other regions and the state as a whole, are included in the Appendix.

VI. Stakeholder Observations

The results of the QCRs should be considered within a broader context of local interaction with community partners. Presented in this section is a summary of impressions and observations offered by the key stakeholders who were interviewed during the course of the review. An additional part of the context for the QCRs is the key role and perceptions of Division staff that live and work in communities within the region. A summary of their observations during a series of focus groups is also presented in this section.

Summary of Stakeholder Interviews

Stakeholder interviews were conducted with a wide range of community partners across the region, including representatives of service providers, education, mental health, law enforcement, and the courts.

What is Working Well

- Community partners see many improvements in relationships and collaboration between the Division, the courts, and tribal agencies. There is information sharing and role exploration. Involved parties are more informed about court procedures.
- The Ute Tribal Social Services has a worker providing home-based services and some new foster parents have been recruited on the reservation.
- There are now about 20 law students who are Guardians ad Litem (GALs) for children on the Ute Reservation. This is a big improvement.
- The Division respects the Indian Child Welfare Act (ICWA) requirements compared to many other states.
- There is more concerted effort to keep siblings together and to achieve permanency for children in Grand County.
- Parents are participating in mediation and child and family team meetings. The utility of these meetings is acknowledged in court in Grand County.
- There is a positive long-term working relationship between law enforcement and the Division in Blanding.
- There is good coordination and communication between the FBI, the Tribal Social Services, the San Juan County Sheriff, the Division, and the Blanding Police Department.
- Response of the on-call CPS worker to calls from law enforcement has improved during the past year in Grand County.

Improvement Opportunities

- Some stakeholders expressed the opinion that the Ute Tribal Social Services are not yet ready to take over cases from the Ute Family Center. In particular, more training is needed for CPS investigations.
- There is a need for more resources and substance abuse treatment programs for adolescents. This is true for tribal cases as well as in other rural communities in Eastern Region.
- There is a lack of treatment resources for perpetrators of sex abuse. In one community it was reported that the same therapist was counseling the perpetrator as well as the victim.
- There is a need for good treatment programs for parents with substance abuse problems in Moab. There is an epidemic of methamphetamine abuse and a lack of resources to help parents. Due to ASFA and Utah legal timeframes for permanency, many parents are losing parental rights and children are losing important family connections.
- There is a lack of resources for Peer Parenting. The Division needs a stronger parenting support program.
- There is a challenge to protect information for ongoing investigations (by law enforcement and CPS), knowing when to involve law enforcement, and how to maintain confidentiality at multi-disciplinary staffings.

Summary of Focus Groups

Focus groups were conducted with caseworkers and supervisors at the Ute Family Center and Division offices in Moab and Blanding.

What is Working Well

- Caseworkers are now using child and family team meetings regularly and report that these meetings work and are useful most of the time.
- Mental health, the Frontier's Project in particular, has bought in to the process of using the Practice Model Principles.
- School involvement in the child and family team in Moab is good. Holding meetings at the school has helped to ensure participation by the teachers and the principal.
- Supervisory support in the Moab office has been excellent during the past year.
- CPS is taking the role of preventing unnecessary involvement with the Division. The child and family team meetings are being used to create good safety plans that minimize agency involvement while ensuring child safety. Resources and ideas come out of the meetings that were not previously identified.
- There is a close working relationship between CPS and the ongoing worker in the Moab office.
- Blanding caseworkers feel that they are able to practice with cultural sensitivity and that there is good interagency collaboration with the Ute and Navajo tribes.
- Abel Ortiz from the Division of Mental Health is working on the issue of mental health capitation and how to get therapists paid for attending child and family team meetings.

- The Division of Youth Corrections is going to build a new Observation and Assessment Unit in Blanding. This will help delinquent kids get needed services without unnecessary Division involvement.
- Access to SAFE at the Ute Family Center is better and is helping to make the paperwork requirements more manageable.
- There is a lot of support for new workers at the Ute Family Center. “It’s like a big family here, everyone is willing to help, a good place to work.”

Concerns and Improvement Opportunities

- Solutions are needed for how to deal with permanency for tribal cases. Some staff think that reviewers should consider the idea of long-term foster care as an acceptable permanency goal in more tribal cases.
- A lack of foster homes in the region is creating hours of driving time for caseworkers to visit children. More foster parents are needed in rural communities.
- Confidentiality is a problem. It often appears to be “rule bound” rather than needs based.
- More flexible funding is needed.
- As mentioned by other stakeholders, caseworkers and supervisors see a need for more therapy options for families.
- Some mental health providers appear to be enabling adolescents by not dealing directly with the issue of substance abuse.
- The requirement for who needs to be at child and family team meetings is becoming rules based – not needs based. “Middle management is asking for a list of team members.” There seem to be different expectations in different offices. Caseworkers want policy clarification around the issue of teaming and coordination.
- Caseworkers have requested assistance with child and family team meetings. It is difficult to take notes and facilitate meetings at the same time.
- The requirement for a written functional assessment has created more paperwork. There is a need to streamline or combine some of the required forms.
- Some caseworkers would like the office technician to assist with scheduling for child and family team meetings.
- Replacements are needed for valuable employees that have recently left their positions at the Ute Family Center and the Moab office. These individuals were teaching parenting classes, facilitating child and family team meetings, and assisting with visitation.

VII. System Performance Analysis, Trends, and Practice Improvement Needs

The QCR findings are presented in graphic form to help quantify the observations of the qualitative assessment. Graphs show a comparison of scores for the baseline year, for last year’s review, and the current review. The graphs of the two broad domains of Child and Family Status and System Performance show the percent of cases in which the key indicators were judged to be “acceptable.” A six-point rating scale is used by reviewers to determine whether or not an indicator is judged to be acceptable or not in a particular case. Each indicator has individualized

Eastern Region Report

scoring guidance for each of the six general rating categories that describes the circumstances most often associated with a particular rating for that indicator. The most general description for each of the ratings is provided below:

- | | |
|---|----------------------------|
| 1 | Completely Unacceptable |
| 2 | Substantially Unacceptable |
| 3 | Partially Unacceptable |
| 4 | Minimally Acceptable |
| 5 | Substantially Acceptable |
| 6 | Optimal Status/Performance |

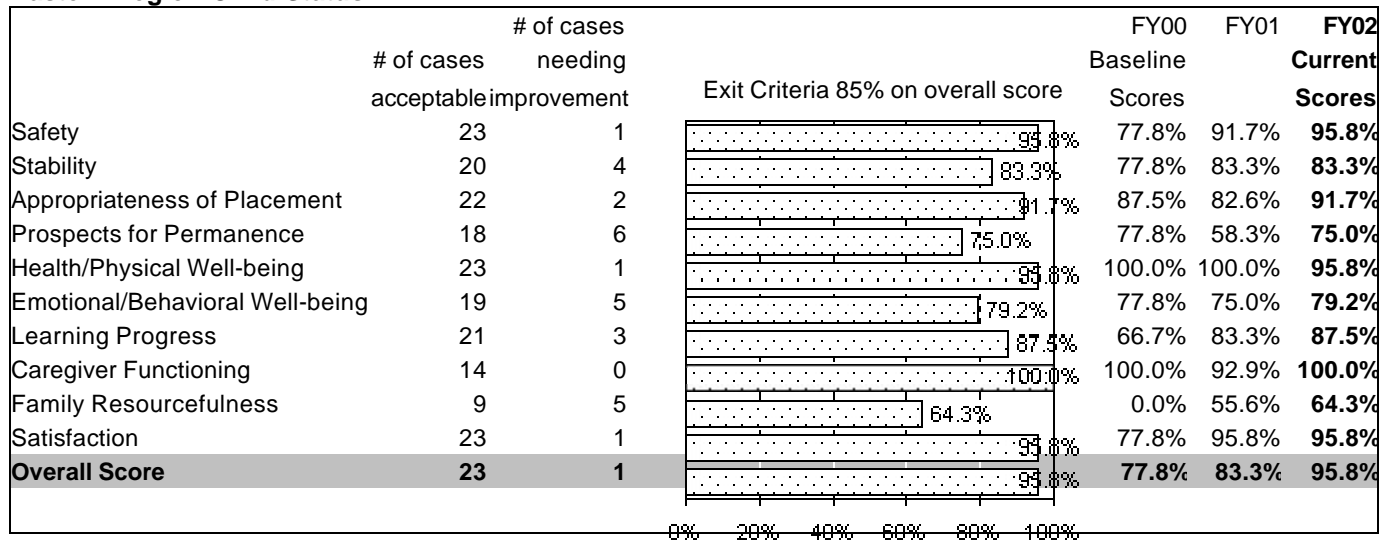
Child and Family Status and System Performance are evaluated using 11* key indicators. An overall, summative score is compiled for each. Results for the summative scores as well as the individual indicators relevant to each of the two broad domains will be presented below along with illustrative graphs. The individual indicators will be presented with the “summative question,” the general definition of the indicator being rated, and the distribution of cases associated with each of the six possible scores.

*There are 11 child and family status indicators; two (learning progress and learning/development progress) are used with children of different ages and are combined in the graph as "learning progress."

Child and Family Status Indicators

Overall Status

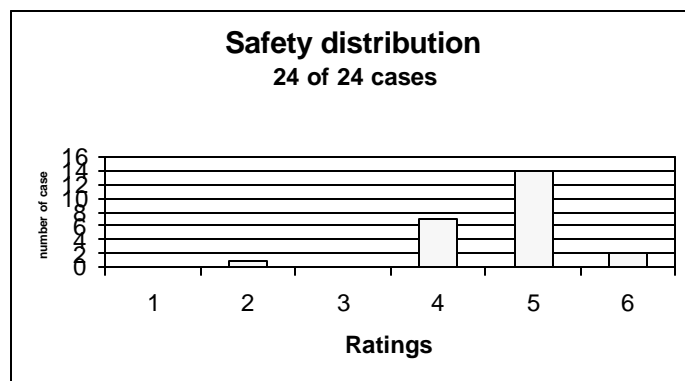
Eastern Region Child Status



Safety

Summative Questions: Is the child safe from manageable risks of harm (caused by others or by the child) in his/her daily living, learning, working and recreational environments? Are others in the child's daily environments safe from the child? Is the child free from unreasonable intimidation and fears at home and school?

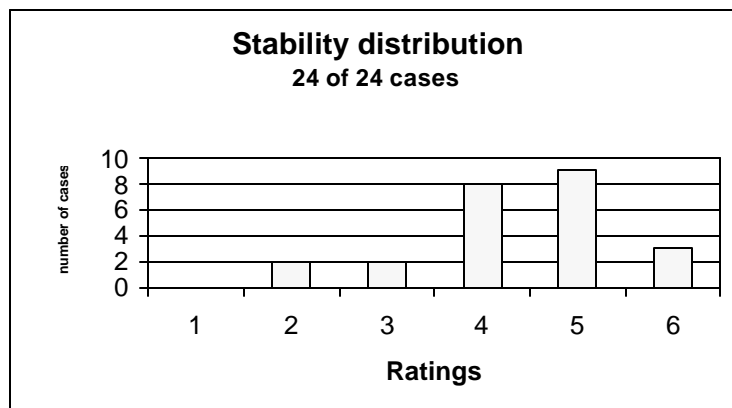
Findings: 95.8% of cases were within the acceptable range (4-6). This is the highest score yet achieved by the Eastern Region on the safety indicator and is a score showing steady progress over the three QCR periods. The score reflects attentive efforts to achieve and maintain safety for children and their families.



Stability

Summative Questions: Are the child's daily living and learning arrangements stable and free from risk of disruption? If not, are appropriate services being provided to achieve stability and reduce the probability of disruption?

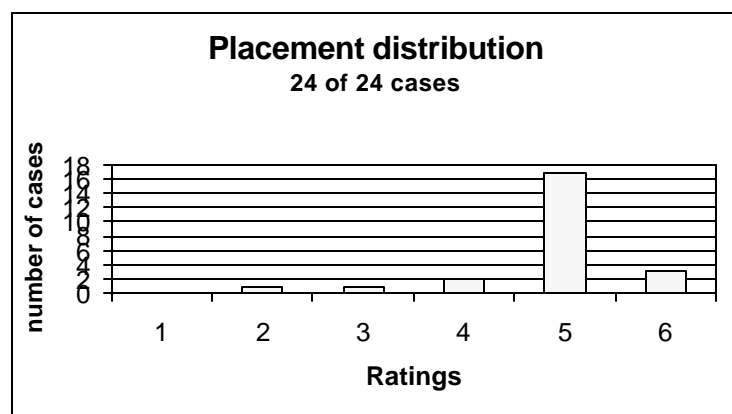
Findings: 83.3% of cases were in the acceptable range (4-6). This score is identical to last year's score; a score that represented some improvement from the baseline year.



Appropriateness of Placement

Summative Questions: Is the child in the most appropriate placement consistent with the child's needs, age ability and peer group and consistent with the child's language and culture?

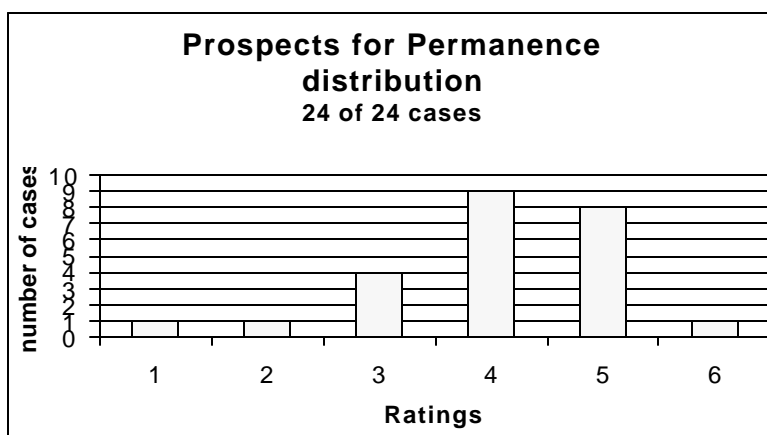
Findings: 91.7% of cases were in the acceptable range (4-6). The Eastern Region demonstrated an improved score in appropriateness of placement from both the previous year and the baseline year.



Prospects for Permanence

Summative Questions: Is the child living in a home that the child, caregivers, and other stakeholders believe will endure until the child becomes independent? If not, is a permanency plan presently being implemented on a timely basis that will ensure that the child will live in a safe, appropriate, permanent home?

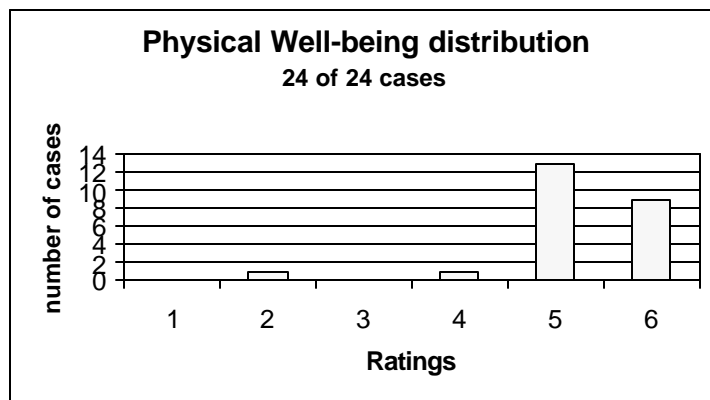
Findings: 75% of cases were within the acceptable range (4-6). This score represents of a significant improvement for the Eastern Region from last year's score of 58.3%, although the score remains one of the lowest of the region's Child and Family Status indicators.



Health/Physical Well-Being

Summative Questions: Is the child in good health? Are the child's basic physical needs being met? Does the child have health care services, as needed?

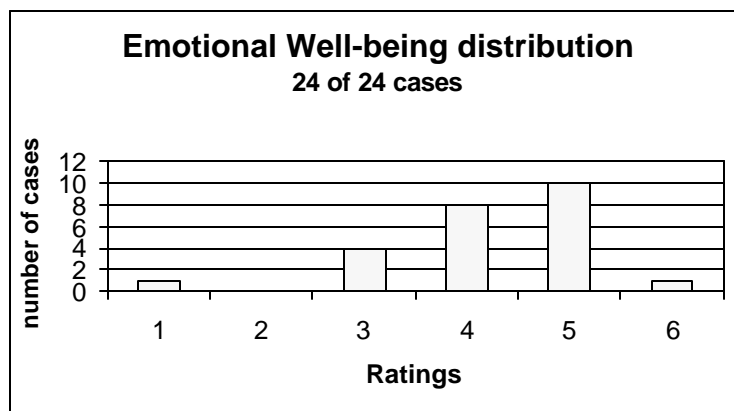
Findings: 95.8% of cases were within the acceptable range (4-6). This score, while slightly lower than the previous two years' perfect scores, reflects consistent attention to the health and physical well-being of children in care.



Emotional/Behavioral Well-Being

Summative Questions: Is the child doing well, emotionally and behaviorally? If not, is the child making reasonable progress toward stable and adequate functioning, emotionally and behaviorally, at home and school?

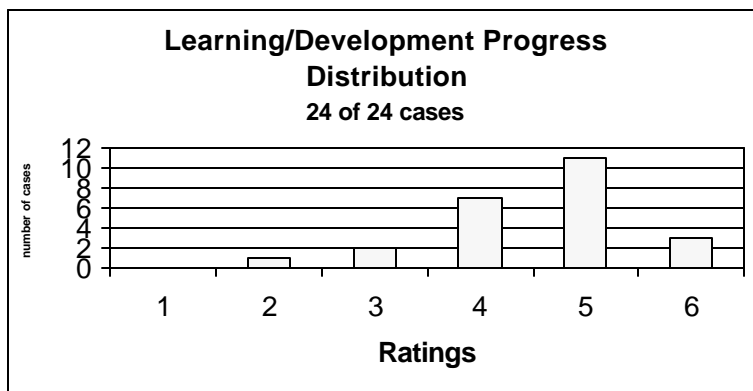
Findings: 79.2% of cases were within the acceptable range (4-6). This score reflects a small improvement over the scores for the preceding two years. Emotional and behavioral well-being remains a significantly greater challenge for the region than health and physical well-being.



Learning/Development Progress

Summative Question: (For children age five and older.) Is the child learning, progressing and gaining essential functional capabilities at a rate commensurate with his/ her age and ability? (For children under 5.) Is the child developing, learning, progressing, and gaining skills at a rate commensurate with his/her age and ability?

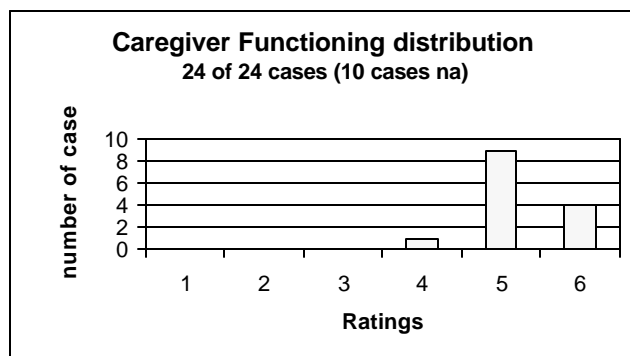
Findings: 87.5% of cases were within the acceptable range (4-6). This score represents consistently improving scores from the baseline year.



Caregiver Functioning

Summative Questions: Are the substitute caregivers, with whom the child is currently residing, willing and able to provide the child with the assistance, supervision, and support necessary for daily living? If added supports are required in the home to meet the needs of the child and assist the caregiver, are these supports meeting the need?

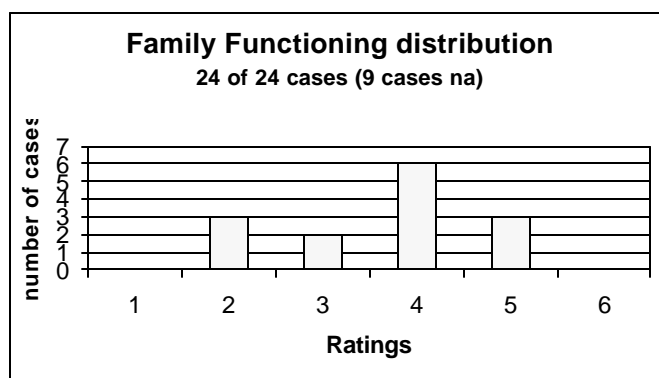
Findings: 100% of cases were within the acceptable range (4-6). This is an area of consistent high performance for the region, with scores for all three years being above 90%.



Family Functioning and Resourcefulness

Summative Questions: Does the family, with whom the child is currently residing or has a goal of reunification, have the capacity to take charge of its issues and situation, enabling them to live together safely and function successfully? Do family members take advantage of opportunities to develop and/or expand a reliable network of social and safety supports to help sustain family functioning and well-being? Is the family willing and able to provide the child with assistance, supervision, and support necessary for daily living?

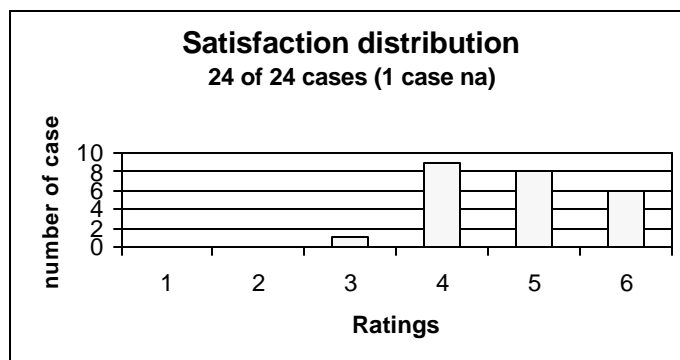
Findings: 64.3% of cases were within the acceptable range (4-6). This score represents continued improvement from the prior two reviews, but represents the region's lowest score among the child and family status indicators.



Satisfaction

Summative Question: Are the child and primary caregiver satisfied with the supports and services they are receiving?

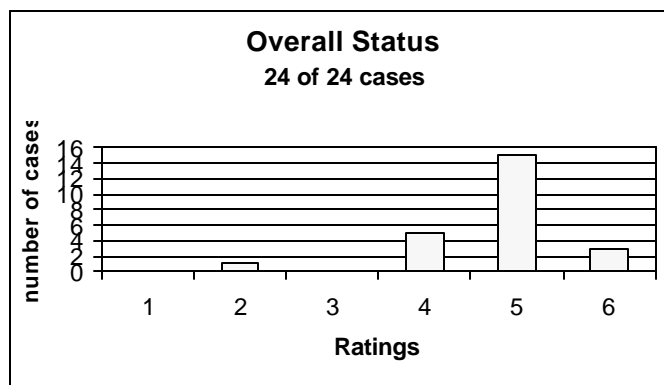
Findings: 95.8% of cases were within the acceptable range (4-6). This score is the same as the previous year's score. Both the current and previous years' scores represent a significant improvement from the baseline year and indicate consistent improvement in consumer satisfaction with services from the Division.



Overall Child Status

Summative Questions: Based on the Service Test findings determined for the Child Status Exams 1-11, how well is this child presently doing? Overall child status is considered acceptable when specified combinations and levels of examination findings are present. A special scoring procedure is used to determine Overall Child Status using a six-point rating scale.

Findings: 95.8% of cases were within the acceptable range (4-6). The region has demonstrated consistent improvement from baseline performance in each review. The current score is especially important because it reaches and surpasses the 85% exit criteria established for overall child status. This is the first year in which the Eastern Region has achieved the exit criteria on one of the domains of the QCR.



System Performance Indicators

Overall System

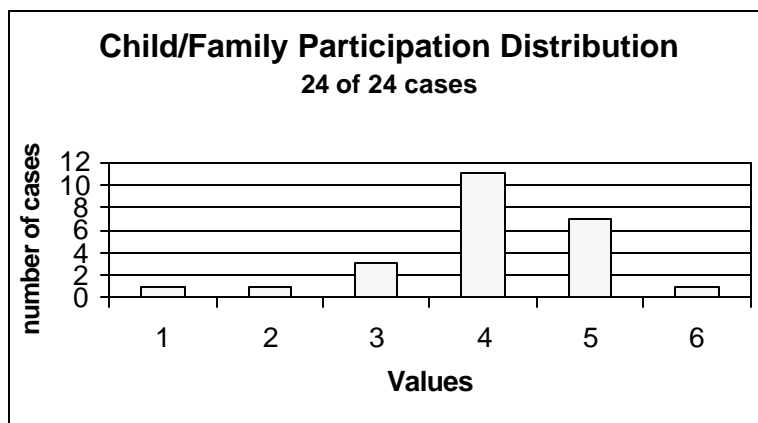
Eastern Region System Performance

	# of cases acceptable	# of cases needing improvement	Exit Criteria 70% on shaded indicators Exit Criteria 85% on overall score	FY00 Baseline Scores	FY01 Scores	FY02 Current Scores
Child & Family Team/Coordination	16	8	66.7%	22.2%	50.0%	66.7%
Functional Assessment	13	11	54.2%	11.1%	66.7%	54.2%
Long-term View	6	18	25.0%	0.0%	50.0%	25.0%
Child & Family Planning Process	16	8	66.7%	0.0%	62.5%	66.7%
Plan Implementation	18	6	75.0%	44.4%	70.8%	75.0%
Tracking & Adaptation	19	5	79.2%	55.6%	75.0%	79.2%
Child & Family Participation	19	5	79.2%	55.6%	75.0%	79.2%
Formal/Informal Supports	22	2	91.7%	77.8%	87.5%	91.7%
Successful Transitions	14	9	60.9%	33.3%	70.8%	60.9%
Effective Results	20	4	83.3%	66.7%	75.0%	83.3%
Caregiver Support	14	0	100.0%	100.0%	92.9%	100.0%
Overall Score	16	8	66.7%	33.3%	75.0%	66.7%

Child/Family Participation

Summative Questions: Are family members (parents, grandparents, and stepparents) or substitute caregivers active participants in the process by which service decisions are made about the child and family? Are parents/caregivers partners in planning, providing, and monitoring supports and services for the child? Is the child actively participating in decisions made about his/her future?

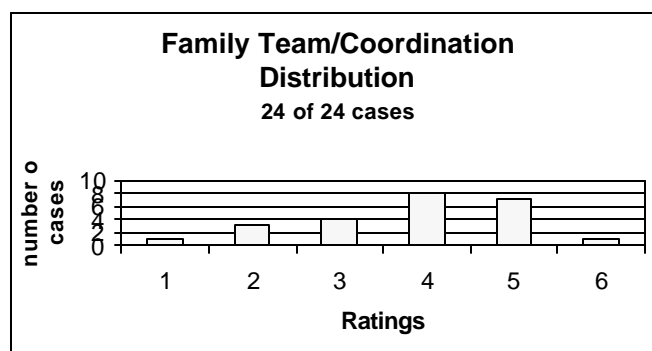
Findings: 79.2% of cases were within the acceptable range (4-6). The score represents a continuing improvement from past years' scores (55.6% and 75%).



Child/Family Team and Team Coordination

Summative Questions: Do the people who provide services to the child/family function as a team? Do the actions of the team reflect a pattern of effective teamwork and collaboration that benefits the child and family? Is there effective coordination and continuity in the organization and provision of service across all interveners and service settings? Is there a single point of coordination and accountability for the assembly, delivery, and results of services provided for this child and family?

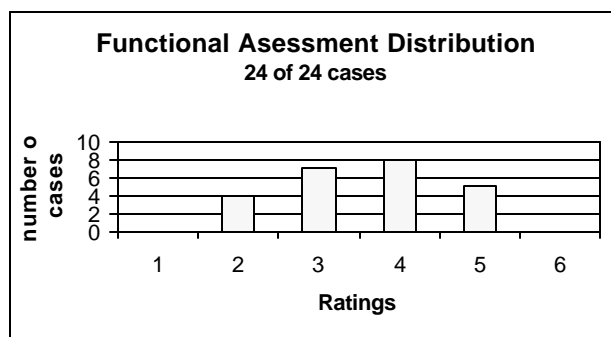
Findings: 66.7% of cases were within the acceptable range (4-6). This score represents a significant improvement over the past year's score (50%) and the baseline year's score (22.2%).



Functional Assessment

Summative Questions: Are the current, obvious and substantial strengths and needs of the child and family identified through existing assessments, both formal and informal, so that all interveners collectively have a “big picture” understanding of the child and family and how to provide effective services for them? Are the critical underlying issues identified that must be resolved for the child to live safely with his/her family independent of agency supervision or to obtain an independent and enduring home?

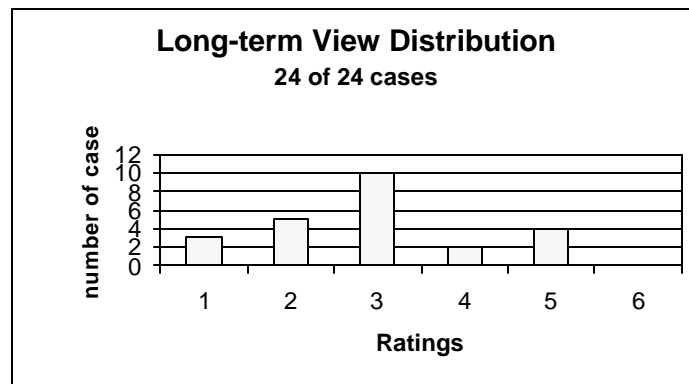
Findings: 54.2% of cases were within the acceptable range (4-6). This score represents a decline from the previous year's score (66.7%), but remains well above the baseline score of 11.1%.



Long-Term View

Summative Questions: Is there an explicit plan for this child and family that should enable them to live safely without supervision from child welfare? Does the plan provide direction and support for making smooth transitions across settings, providers and levels of service?

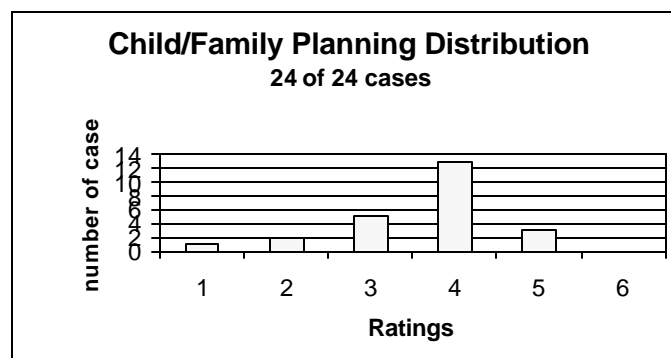
Findings: 25% of the cases were within the acceptable range (4-6). This score is a surprising reversal from last year's score of 50%, although it remains well above baseline year when no cases received acceptable scores.



Child and Family Planning Process

Summative Questions: Is the service plan (SP) individualized and relevant to needs and goals? Are supports, services and interventions assembled into a holistic and coherent service process that provides a mix of elements uniquely matched to the child/family's situation and preferences? Does the combination of supports and services fit the child and family's situation so as to maximize potential results and minimize conflicting strategies and inconveniences?

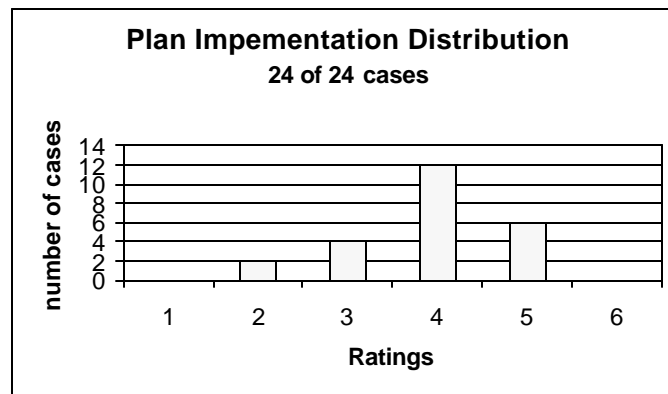
Findings: 66.7% of cases were within the acceptable range (4-6). This score represents some improvement from the previous year's score (62.5%) and continued improvement from the baseline year in which no cases reviewed received acceptable scores.



Plan Implementation

Summative Questions: Are the services and activities specified in the service plan for the child and family, 1) being implemented as planned, 2) delivered in a timely manner and 3) at an appropriate level of intensity? Are the necessary supports, services and resources available to the child and family to meet the needs identified in the SP?

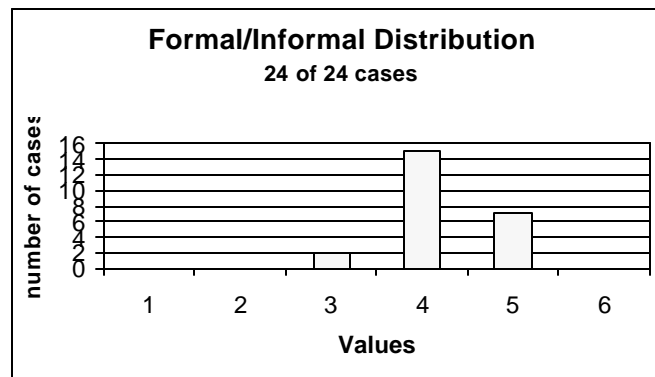
Findings: 75% of cases were within the acceptable range (4-6). This score represents some improvement from the previous year's score (70.8%) and significant improvement over the baseline score of 44.4%.



Formal/Informal Supports

Summative Questions: Is the available array of school, home and community supports and services provided adequate to assist the child and caregiver reach levels of functioning necessary for the child to make developmental and academic progress commensurate with age and ability?

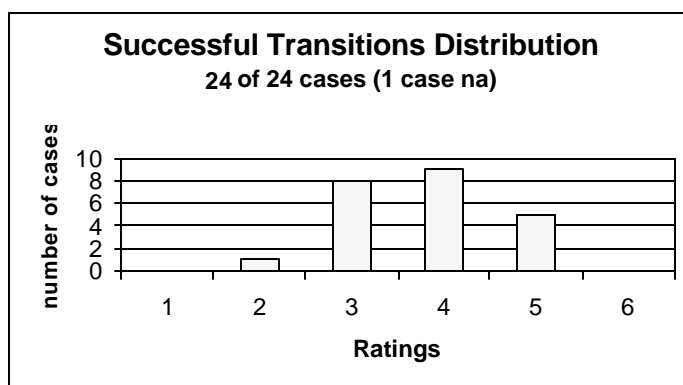
Findings: 91.7% of cases were within the acceptable range (4-6). This score represents continued steady improvement from the prior year and baseline scores (87.5% and 77.8%, respectively).



Successful Transitions

Summative Questions: Is the next age-appropriate placement transition for the child being planned and implemented to assure a timely, smooth and successful situation for the child after the change occurs? If the child is returning home and to school from a temporary placement in a treatment or detention setting, are transition arrangements being made to assure a smooth return and successful functioning in daily settings following the return?

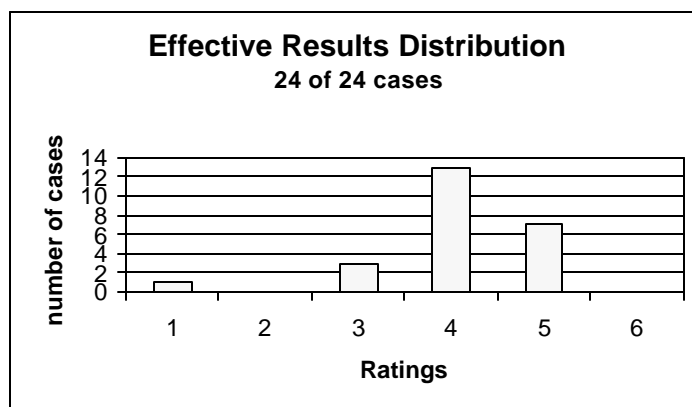
Findings: 60.9% of cases were within the acceptable range (4-6). This score represents a reduction from the prior year's score of 70.8%, but remains above the baseline score of 33.3%.



Effective Results

Summative Questions: Are planned education, therapies, services and supports resulting in improved functioning and achievement of desired outcomes for the child and caregiver that will enable the child to live in an enduring home without agency oversight?

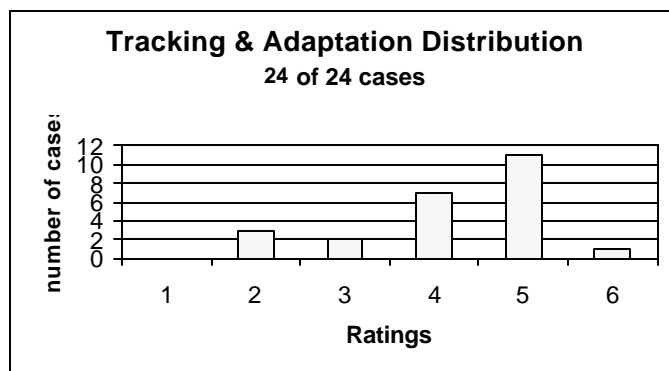
Findings: 83.3% of cases were within the acceptable range (4-6). This score represents steady continued improvement over the past year's score of 75% and the baseline score of 66.7%.



Tracking and Adaptation

Summative Questions: Are the child and caregiver's status, service process, and results routinely followed along and evaluated? Are services modified to respond to the changing needs of the child and caregiver and to apply knowledge gained about service efforts and results to create a self-correcting service process?

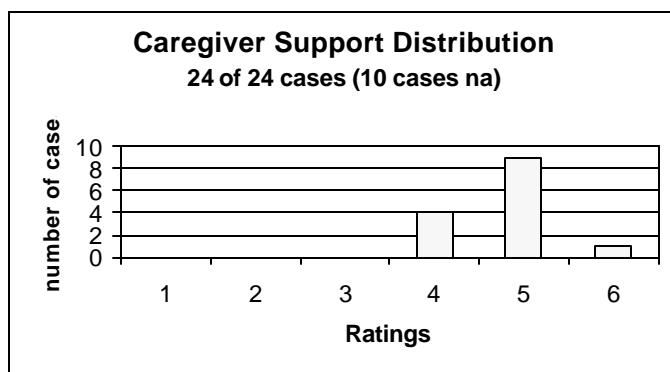
Findings: 79.2% of cases were within the acceptable range (4-6). This score represents continued improvement from last year's score of 75% and from the baseline score of 55.6%.



Caregiver Support

Summative Questions: Are substitute caregivers in the child's home receiving the training, assistance and supports necessary for them to perform essential parenting or caregiving functions for this child? Is the array of services provided adequate in variety, intensity and dependability to provide for caregiver choices and to enable caregivers to meet the needs of the child while maintaining the stability of the home?

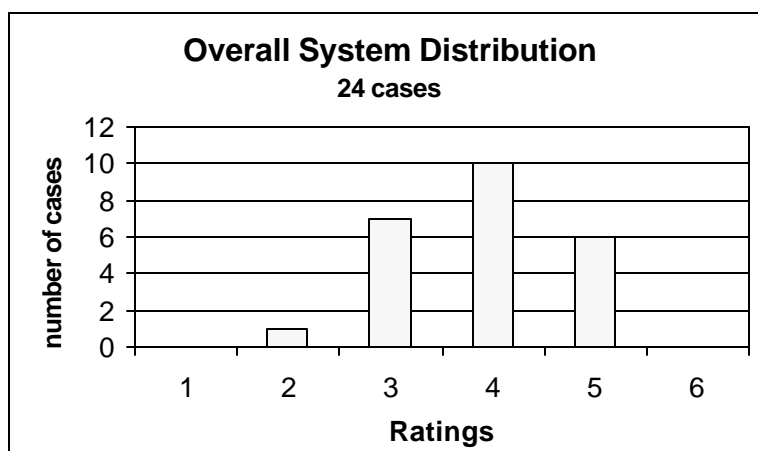
Findings: 100% of scores were in the acceptable range (4-6). The score represents consistent attention to the needs of substitute caregivers that has remained high through prior reviews (92.9% and 100%, respectively).



Overall System Performance

Summative Questions: Based on the Qualitative Case Review findings determined for System Performance exams 1-10, how well is the service system functioning for this child now? Overall system performance is considered acceptable when specified combinations and levels of examination findings are present. A special scoring procedure is used to determine Overall System Performance for a child.

Findings: 66.7% of cases were within the acceptable range (4-6). This score represents a decline in the overall system performance score from the previous year's review (75%), but remains twice the baseline score of 33.3%.



Status Forecast

One additional measure of case status is the prognosis by the reviewer of the child and family's likely status in six months, given the current level of system performance. Reviewers respond to the question, "Based on current Division involvement for this child, family, and caregiver, is the child's overall status likely to improve, stay about the same, or decline over the next six months? Take into account the important transitions that are likely to occur during this time period." Of the cases reviewed, 46% were expected to improve, 37% were expected to stay about the same, and 17% were expected to decline in status.

Outcome Matrix--Overall Status of Child/Family

The display below presents a matrix analysis of the service testing time during the QCR. Each of the cells in the matrix shows the percent of children experiencing one of four possible outcomes:

- Outcome 1: child status acceptable, system performance acceptable
- Outcome 2: child status unacceptable, system performance acceptable
- Outcome 3: child status acceptable, system performance unacceptable
- Outcome 4: child status unacceptable, system performance unacceptable

Obviously, the desirable result is to have as many children in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are, most often, either unusually resilient and resourceful children, or children who have some “champion” or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children who, in spite of good system performance, do not do well (these children would fall in Outcome 2).

		Favorable Status of Child	Unfavorable Status of Child	
		Outcome 1	Outcome 2	
Acceptability of Service System Performance	Acceptable System Performance	Good status for the child, system performance presently acceptable. N=16 67%	Poor status for the child, system performance minimally acceptable but limited in reach or efficacy. N=0 0%	67%
	Unacceptable System Performance	Good status for the child, system performance presently unacceptable. N=7 29%	Poor status for the child, system performance unacceptable. N=1 4%	33%
		96%	4%	100%

Case Story Analysis

For each of the cases reviewed in Eastern Region, the review team produced a narrative shortly after the review was completed. The story write-up contains a description of the findings, explaining from the reviewer's perspective what seems to be working in the system and what needs improvement. The narratives help explain the numerical results presented in the previous chapter by describing the circumstances of each case. Key practice issues identified are discussed below.

Summary of Case Specific Findings

Child and Family Status

Safety

The safety scores for the Eastern Region have continued to improve each year the QCRs have been conducted. The cumulative safety score for the 24 cases reviewed this year was 95.8%. There is evident attention to safety for children -- both those residing at home and those in foster care in the great majority of cases. The single case that did not receive an acceptable score on safety in the current review represents the complexity of trying to ensure safety. The case combined a number of issues identified as concerns not only within the reviews, but also in the stakeholder interviews and focus groups with staff. The case involved an adolescent with a serious alcohol and drug abuse problem. The reviewer notes, *"It is reported that he is intoxicated at least two -- three days per week. Several of those whom we interviewed expressed concerns for [the child's] safety, and his physical and emotional well-being. This is because of the level of abuse that [the child] has reached. They believe this to be an unmanaged risk."*

The reviewers in this case were concerned not only for the immediate safety of the youngster involved, but also because of the lack of successful intervention to address the clear risks. Some of the reasons for the lack of effective intervention relate to the timely availability of critical services such as residential treatment for substance abuse and erratic communication. This particular youngster was court ordered into such a treatment program more than three months prior to the review, but had yet to be placed in any program at the time of the review. More worrisome, the case was also characterized by inadequate system performance in such critical areas as child and family team and team coordination, functional assessment, child and family planning process, tracking and adaptation, and effective results. It is these dangerous intersections of challenging cases, limited resources, and inadequate practice that present a particular risk in terms of safety.

Stability

Scores on stability in the Eastern Region improved from the baseline year to the prior year's review, but improvements have stalled in the current year's review. While the current score of 83.3% is near the overall child status exit criterion (note: there are not individual indicator exit criteria for child status like there are for system performance individual indicators), stability is a key indicator and outcome for children. As such, it is worthwhile to focus attention on this indicator. Stability often impacts other important indicators such as safety, permanence, and emotional or behavioral well-being. There are times that stability may be the "leading indicator" for other concerns that may emerge in its wake. For example, children who are experiencing significant instability may also be found at risk in terms of safety (while on runaway status, for example) or emotional or behavioral well-being (failing to establish meaningful attachments, for example).

The importance of stability can be seen in two contrasting case stories, both involving challenging teenagers with complex needs. In the first case, a child with a history of chronic neglect, chaotic home environment, and developmental disabilities was initially placed with a relative who received close communication and monitoring so that supports and services responded to the needs in the home in a timely way. The reviewer notes, *"Early attention to safety and stability in this case provided a good foundation for progress. The Division 'heard' the aunt when she expressed a need for additional support and quickly got her licensed as a foster provider...Stability has been especially strong due to the first placement with family and with supports to the aunt."* The placement for this child has been safe and stable for a significant period of time.

In the second case, the reviewer notes, *"The move from [the child's] initial proctor home inadvertently triggered a series of placements including a school change. His plan calls for him to be returned to his original placement at the end of the school year. If this occurs, [the child] will have had five moves in less than a year. This has obviously seriously affected his stability and may have been avoided through the use of interventions to preserve the initial placement...For a child who has attachment issues, stability is essential in developing a context in which consistent progress can occur."* This child has not only inadequate stability, but also inadequate prospects for permanence and significant issues around emotional or behavioral well-being.

Prospects for Permanence

Scores on prospects for permanence significantly improved in the Eastern Region from the prior year's review. While the current score of 75% represents important progress and should be celebrated, additional focus on permanence is warranted because of its role as a fundamental desired outcome for all children. In a case in which permanency is a basic need, a reviewer notes, *"There has been no progress toward permanence. The goal of long-term foster care appears to be the lack of an alternative rather than a thoughtful process that results from team decisions...The target child is being moved to another foster home when school is out. In his current placement there was no apparent attachment or commitment. Whether the new foster parents will be a long-term placement remains to be seen...There are no strategies in place to achieve permanence."* Often, inadequate permanence is associated with insufficient teaming, assessment, and the absence of a long-term view.

There were also examples among the cases reviewed where well-functioning teams developed clear assessments and carefully implemented plans to achieve a long-term view. One such case involved supporting one of the most difficult permanency goals to implement successfully: emancipation. The reviewers described the supports in place for an adolescent recently released from custody: *"The informal supports in place for [the child] include her father, who is willing and able to have her live with him; her grandmother, who is willing to help her financially in going to college; and several friends to whom she feels connected. She also has in the informal social support network through the people she knows and interacts with at her work...The formal supports that have been in place for [the child] include a school counselor who connected with [the child] and help her at school by being available to talk when [the child] needed to talk."*

[The child] also had a formal support network through the substance abuse treatment program that she completed and through the aftercare program and NA. She also received services from the local mental health agency in the form of therapy. An ongoing formal support is the office of vocational rehabilitation." When asked about his family's involvement with the Division the parent replied, *"I couldn't be happier... We have a team [and] we have a plan."*

Emotional and Behavioral Well-Being

Emotional and behavioral well-being scores, while improving to an average of 79.2%, remain an outcome that will require consistent attention. Not surprisingly, the lower scoring outcomes within the Child and Family Status indicators are among the most difficult to change: indicators like stability, permanence, emotional and behavioral well-being, and family resourcefulness. While an outcome or indicator like safety can be changed "overnight" by a single specific action like removal of a child from a dangerous environment, or having a parent leave a violent spouse, achieving permanence or emotional and behavioral well-being can require complex and time-consuming steps. The indicators noted above are also highly interactive and interrelated. For example, children with inadequate stability and permanence were more likely to demonstrate emotional or behavioral symptoms. Similarly, where family resourcefulness was inadequate, the prospects for finding emotional and behavioral well-being or stability were limited, and the chances of permanence through reunification or remaining home were speculative.

Regional efforts to improve outcomes in these important areas are more likely to be effective when they are integrated and based upon developing the full range of system performance indicators. Integrated efforts are important because of the interrelatedness of the outcomes. For example, trying to improve emotional or behavioral well-being -- even with extensive and skillful therapy -- is likely to be unsuccessful if the child is missing stability and permanence in their life. Similarly, many of the important system performance functions are interrelated. Assembling a large team alone, without adequate child and family participation and without clear long-term view based on an adequate functional assessment, is likely to produce limited benefits.

Among the cases reviewed were examples where important outcomes were being achieved through simultaneous attention to improving emotional and behavioral results through treatment and attention to stability and permanence. In one case, the reviewer noted, *"Even though [the child] is still anxious a lot of the time, he's able to manage his anxiety better as well as his anger. He is no longer aggressive and rarely destroys property on purpose...He is no longer encopretic or enuretic...[The child] was finally able to have consistent, stable caretakers who could adequately manage [the child's] behavior and teach him new methods of dealing with stressors in his life. [The child] was able to participate in individual and group therapy several days per week with the same therapist for 13 months. This therapist had a lot of experience in working with children who had attachment issues as well as sexual issues and multiple behavioral problems."*

Learning/Development Progress

The scores related to learning and developmental progress for children in the Eastern Region have improved each year of the QCR to their current average of 87.5%. This is an admirable achievement, and represents important progress on an important outcome for children served by the Division. Although learning and developmental progress are sometimes viewed as being outside the normal purview of child welfare, they represent a critical outcome for children. The importance of learning and developmental progress is obvious due to the clear relationship between progress in these areas and other desirable outcomes such as the development of social skills and friendships, vocational preparation, a sense of accomplishment, and independence. While education may be the legal responsibility of another state agency, assessment and advocacy for educational and developmental services is a prime responsibility whenever child welfare assumed responsibility for a child through custody or supervision.

It is encouraging that the Eastern Region has worked to improve educational and developmental outcomes for children in care because of the pivotal role that learning and developmental progress play in both the day-to-day lives of children and their long-term prospects for becoming stable, responsible adults. An example from one of the cases reviewed indicated good attention to learning progress, even though the risk that brought the child into care was domestic violence. *"[The caseworker] coached [the parents] regarding consistent discipline and consequences for [the child]. She helped [the parents] arrange for an alternative school for [the child] with intensive one-on-one attention. Starting slowly, [the child] gradually increased his investment until attendance was no longer a problem. He attended weekly IOP group sessions for his drug and alcohol dependency. [The child] found the sessions difficult. The school counselor explained that [the child] does not process information easily...[The child] will continue in his present alternative school for the remainder of the current year and for the next with the expectation that he will graduate with a basic adult education diploma...In the meantime, the local interagency council will find him a job in auto body repair where he can shadow an experienced repairman and earn money during the summer and in the afternoons next year."* This youngster leaves Division custody both safe from the risk that brought him into care and reasonably prepared for independent living.

Family Functioning and Resourcefulness

This indicator or outcome had the lowest overall score of all of the Child and Family Status indicators in the Eastern Region at 64.3%. This score does represent notable progress over the prior year and vast progress from the baseline year. Even so, it remains behind all of the other Child and Family Status indicators in spite of its critical importance. The importance of this indicator rests in the fact that the permanency goals for most children in Division care or supervision are to remain home or return home. This means that whatever progress children make during the period of time that they and their families are involved with the Division will ultimately be highly dependent upon the capacity of the family to carry on successfully without the Division in their lives. Because of this sobering reality, the indicator or outcome of family functioning and resourcefulness is probably the "leading indicator" for long-term success.

Eastern Region Report

Examples from case stories illustrate the pivotal role of family functioning and resourcefulness on future prospects for children. In one case reviewed, attention and intervention appeared to be focused on the therapeutic needs of a six-year-old, but the reviewer describes the family: *"The stress of being caretaker for two young sons in addition to her psychiatric and substance abuse problems seem to overwhelm this mother. Once the father's next job starts he will be out of the home during the week once again. This will leave all parenting responsibilities on this mother. The father's absence for work will also present a barrier to their continuing in marriage counseling where they are supposedly addressing domestic violence issues. If the mother enters IOP as ordered by the court, she will necessarily need assistance with childcare the three nights a week she attends the program... While the mother reports that her medications for her bipolar condition are helpful to her and thus she no longer needs to 'self medicate', it should be noted that two recent UAs have indicated continued use of substances by the mother... While attending to the therapeutic needs of the child, little progress has been made in assisting the parents to deal with these issues that threaten to stability of the family."*

In contrast, another reviewer describes a parent nearing case closure: *"[The parent] appears to be working aggressively with his formal supports. [The parent] appears committed to his [church] supports, meeting with his pastor, and participating in pastoral counseling. He also has continued therapy with a therapist that was working with him prior to Division involvement. He meets with the children's therapist on parenting issues and participates in the domestic violence group (having now completed) 12 of 24 weeks. These support systems appear to be working with [the parent] and more than likely would continue after Division involvement (individual and parenting counseling as well as the pastoral counseling). [The parent] is reported by his treatment providers as invested in his programming and seeking relevant information that would support his children. [The parent] has been able to make friendships in the community and these friends support him in taking care of his kids and working through difficult times."* Where family functioning and resourcefulness are sufficient, re-referral and re-entry into care are less common.

In another case reviewed, a gradual re-involvement of a parent after reunification services were (appropriately) discontinued has improved communication for the mother; and has enabled her to be more supportive of her child's permanent placement. The reviewer notes, *"Even though reunification efforts have been terminated, there continues to be a connection between mom and her children. A recent decision to include mom in some activities has pleased both the girls and mom... Currently mom has one overnight unsupervised visit with her daughters each month... The one visit monthly seems to be acceptable to both mother and daughters. The Division provides transportation to and from the visits each month."* Rather than feeling pulled between her mentally ill mother and a stable foster placement, this teenager can focus more attention on her future.

System Performance

The System Performance indicators measure what the Division has committed to do to implement the Plan and to achieve important outcomes for children and families such as safety,

stability, permanence, and well-being. In reviewing the System Performance scores, it is important to note some potential distinctions between System Performance indicators and Child and Family Status indicators. Child and Family Status indicators are principally descriptions of outcomes -- the status of the child and family when the case was reviewed. Child and family status may be deeply affected by the actions or activities of the Division, but they are also affected by a range of other factors such as resilience or personal history. System Performance indicators, on the other hand, are more frequently descriptions of actions or activities that are integral to Division practice in accord with the principles and practice standards of the Plan. While some of the System Performance indicators are outcomes (such as effective results), they are primarily actions or activities. Improving system performance initially improves short-term child and family outcomes; further advances in system performance helps to develop outcomes that are robust and self-sustaining.

While all of the System Performance indicators are important, this analysis will not address every indicator, but will focus primarily on those indicators directly tied to exit criteria. In addition to the indicators tied to the exit criteria, attention will be given to other noteworthy indicators. As with the overall score for Child and Family Status, the overall score for the System Performance indicators will only be addressed briefly since it is an average of the actual indicators and can only be improved by improving the individual System Performance indicators.

There are the 11 System Performance indicators, six of which are designated core indicators with an assigned 70% exit criteria. Eight out of 11 of the System Performance indicators showed improvement from last year's scores. Every indicator score showed improvement from the baseline scores. Three of the six core indicators met the 70% exit criteria. Among the core functions with assigned exit criteria, four out of six scores improved from last year. A number of the indicators show evidence of focused attention and determined effort that will be addressed later.

Three out of the 11 indicators showed declines from last year's scores (although they remain notably higher than the baseline scores). Two of these three are among the six core indicators and had a substantial negative impact on the overall score, resulting in a moderate decline in the overall score from last year's overall score. Although the reasons for these declines are not entirely clear, they may result from such varied causes as efforts to focus on Native American children, loss of focus on indicators that were targeted for improvement last year, and difficulties with implementing training and clarifying policy relevant to the Practice Model. Rather than speculating further, primary attention will be given to analysis of the individual indicators.

Child and Family Team and Coordination

The score on child and family team and team coordination improved significantly this year from 50% to 66.7%. It may be worth noting that an improvement of similar proportion next year would bring this critical indicator well above the exit criteria. This indicator is of special importance because the child and family team is the foundation for so much of what the Division does with families when it practices in accord with the principles and practice standards to which

it is committed. Much of the action and activity in a case is determined by the quality of the child and family team. For example, all of the other core indicators derive primarily from the presence or absence of a properly constituted, effective, and well coordinated child and family team. As specific examples, while there may be plans and plan implementation without a child and family team, or tracking and adaptation of services, these actions and activities are much more likely to be successful when they emerge from a successful child and family team. Efforts to improve the quality of the child and family teams are likely to show the greatest positive ripple effect through the other System Performance indicators.

Functional Assessment

Functional assessment was one of the three scores that had a surprising decline from last year -- from 66.7% to 54.2%. This decline is difficult to explain in light of improvements in other indicators that are logically related to functional assessment. For example, there was an improvement in the score on child and family participation. This indicator is, among other things, a measure of engagement; and improved engagement should contribute to improved assessment. Similarly, there was an improvement in the score for tracking and adaptation, and improved tracking and adaptation of services might be expected to contribute to improved assessments. Most important, there was a significant improvement in the score for child and family team and team coordination that, logically, would support improved assessment. One possible explanation has to do with the impact of reviewing a substantial number of Native American children under the jurisdiction of the tribal courts. Conflicts between ordinary policy expectations and cultural values within the tribes may be reflected in the functional assessment and long-term view scores. Other than the factors noted earlier (a loss of focused on indicators that were targeted for improvement last year and difficulties with implementing training and clarifying policy relevant to the Practice Model), there are few other possible explanations.

Long-Term View

The score for long-term view -- the ability to develop a strategic vision for a child and family that will inform planning, provide direction and support through different stages of progress, and enable them to live safely without supervision from child welfare -- declined dramatically from 50% last year to 25% this year. A related indicator, successful transitions, also declined, though less dramatically (from 70.8% to 60.9%). This decline is also difficult to explain in light of other improvements and is subject to the same observations as those made about functional assessment above.

An important developmental consideration is applicable to both long-term view and successful transitions. As child welfare systems reform and improve, there is a perceptible progression from a reactive approach to a proactive approach. Systems that are struggling tend to be shortsighted and crisis oriented. Major concerns are safety, placements, and health emergencies. Systems that are well functioning -- that have an effective practice model, and the skills and resources to implement it -- begin to handle what would previously have been crises competently and progress to a focus on sustainable progress.

This focus on sustainable progress is evidenced by the ability to develop a long-term view, rather than a crisis view, of cases and to anticipate and plan for successful transitions. To the extent that the Division has the skills and resources to implement the Practice Model, it is reasonable to expect that there will be progress from the basic skills of developing teams and planning around immediate issues to teams that are sufficiently advanced and skillful enough to consistently attend to a long-term view and the attendant successful transitions.

Child and Family Planning Process

The score for the child and family planning process indicator showed a modest improvement from last year's score of 62.5% to the current 66.7%. Although this is a modest improvement, it is within "striking distance" of the 70% exit criterion for core System Performance indicators. Both last year's score and the current score are vast improvements over the baseline score, when none of the cases reviewed demonstrated an acceptable child and family planning process. The region should be encouraged by this progress.

A review of the case stories indicates that the major obstacle to continue progress on this indicator has to do with expanding the use of child and family teams and increasing their quality. This is a developmental process, and the significant improvement in the teaming indicator has already been noted above. Some of the meetings described as "child and family planning team" still are probably better described as professional staffings to which parents and children have been invited. As policy is developed that better defines the agency's expectations about child and family teams and staff are coached and mentored in accord with that policy, scores on both child and family team and child and family planning process should improve. Another potential contributor to improvement would be the timely modification of SAFE to support a highly flexible child and family planning process. Staff currently struggle with how to do highly flexible, family centered planning when many expectations around their performance are based on compliance with the rigid SAFE planning format. Staff are discouraged at feeling that they have to essentially do two plans -- one for the family and team and one for SAFE.

Plan Implementation

The score for plan implementation, which barely met the exit criterion for core indicators last year, showed a modest improvement from 70.8% to 75% this year. If this trend continues, plan implementation should not be an obstacle to progress. Even though there is a close relationship between adequate planning and plan implementation, it is important to recognize the difference in the quality of plans and the quality of their implementation.

Tracking and Adaptation

The score for tracking and adaptation -- monitoring services and progress, and making timely changes based on results -- continue to improve from 75% last year to 79.2% in the current review. This scoring trend should provide encouragement to the region that important changes in practice are being implemented more consistently. Conscientious tracking and activation essentially provides the intelligence for planning: knowing, and building on what works, and

changing what doesn't work. It is not surprising, but is encouraging that significant improvements in child and family teaming and team coordination parallels improvement in planning, plan implementation, and tracking and adaptation.

Child and Family Participation

Even though the indicator for child and family participation is not listed as a core system indicator, it is worthy of the most serious attention because it measures, among other things, the quality and depth of the engagement with children and families. Virtually every System Performance indicator is ultimately dependent upon how successfully the system has engaged the child and family. The prospects for successful assessment or planning with the child or family are remote if they are not engaged and refuse to participate, or do so only under duress. For this reason, it is encouraging to see continued improvement in the child and family participation score from the baseline year and the past year (55.6% and 75%, respectively) to the current 79.2%. The Eastern Region should take pride that engagement and other aspects of child and family participation continue to improve.

Effective Results

The scores for the effective results indicator continue to improve from the baseline year and the prior year (66.7% and 75%, respectively) to the current year average of 83.3%. Not surprisingly, the System Performance indicator directly examining effective results advances at about the same rate as the overall Child and Family Status indicator. The overall Child and Family Status indicator score is generally higher (because some children and families benefit from their own resilience and the action of others outside the child welfare system). Even so, there is a strong and encouraging logical connection: that as effective results flow from better practice, the outcomes for children and families improve.

VIII. Recommendations for Practice Improvement

At the conclusion of the week of QCRs, the review team provides the regional staff and invited community stakeholders with its impressions regarding the strengths observed in the cases reviewed and practice development opportunities that were observed during the review. This is a public meeting and provides an opportunity for the community to hear about both the progress and challenges in local child welfare practice. While these initial impressions did not have the benefit of a full analysis of the aggregate scores of practice trends in all cases, the feedback is useful in quickly presenting and interpreting what was learned. At the conclusion of this section, a briefer, more analytic and integrated list of recommendations will be presented.

Note: The strengths of regional practice were reported earlier in this document (see section IV). The list of the practice development opportunities is developed "on the spot," so it includes general issues as well as case specific issues. The feedback suggested the following practice development opportunities and challenges.

Practice Development Opportunities

- Some meetings are still agency driven, rather than family driven, more like staffings.
- Refine the process of functional assessment by getting to the underlying needs/issues.
- There is a need for more culturally sensitive resources for Native American children (especially foster homes).
- There are still some community partners not willing/able to come to child and family planning meetings -- this negatively impacts outcomes.
- Challenge: How does the Division balance the view of the formal system (professionals and agency) and the view of the family when there are fundamental conflicts?
- Challenge: Getting the new child and family case plan template on SAFE.
- There is a need to view extended family as more than just a placement resource.
- Serious concerns were expressed about using visits with family or siblings as rewards or punishment; in some cases, this decision was left to the therapist. Visitation is the child's right, not a privilege.
- Visitation should be supported to maintain a bond with family members in view of the child's long-term need for family connections, even when reunification is not the permanency goal.
- Child and family plans need to be more routinely strength-based.
- Challenge: Clan politics (turf issues) can be a barrier to accessing resources in some tribal cases.
- Challenge: There is a need for more open communication with the tribal courts.
- Challenge: How to accommodate cultural values around permanency issues in cases where there is apparent conflict between cultural values and ASFA and state laws.
- Address gaps in functional assessments related to the family history that result in incomplete or conflicting long-term views.
- Changes in the family circumstances can alter the viability of established long-term views. Teams need to be comfortable asking families about their plans.
- Need: A number of children were identified who needed special education services, or different (focus or intensity) special education services than they were receiving. The Division appears to be uneven in its level of communication and advocacy with YIC and schools.
- Confidentiality appears to be a particular challenge in some small communities and school systems.
- Concerns were expressed about the cultural sensitivity (presumptions about Native American children and families) in some public school systems.
- There is a need to address the cumulative amount of paperwork -- workers are required to do new documents on top of old documents rather than replacing the old documents.
- Community partners want to be part of the planning process and need a clearer path to involvement.

In addition to the strengths list and practice development opportunity list, there is an opportunity for discussion around the questions, "Given all that you have heard about practice strengths and

practice development opportunities, what would be your first steps or priorities? What actions would produce the most immediate benefit in terms of improved outcomes for children and families?". These were the responses of the assembled group:

Steps/Recommendation

- Develop better clarity around the relationship between family team meetings and the functional assessment process. There is a need to better understand the role of the family and family team meetings in developing and updating functional assessments.
- It would be beneficial to incorporate a discussion of the long-term view into almost every family team meeting. Being reminded of that strategic vision would help prevent "losing sight of the forest for the trees."
- Increasing the use of coaching and mentoring. Everyone involved in the coaching or mentoring role would benefit from participating in the QCR as a reviewer.
- Develop more strategies related to working with the Native American tribes. Look at incorporating Native American perspectives in the review protocol.
- Look for new and creative ways (engagement strategies) to involve informal supports of families.
- Help get more foster parents to the Practice Model training: this would help to ensure everyone is working from the same principles and strategies.

Practice Improvement Recommendations

This report represents the third year of QCRs for the Eastern Region. There has been significant progress in the indicators of Child and Family Status. Many of the outcomes examined by the Child and Family Status indicators have improved, some quite dramatically. The overall Child and Family Status scores have progressed from a baseline of 77.8% to 83.3% last year to the current 95.8%; a score that meets the exit criterion established in the Plan. It is important to note that meeting or exceeding 85% on the overall Child and Family Status indicator is one step in a multi-step exit process. The agency must be able to demonstrate scores that meet the exit criteria in two successive years and must meet the exit criteria for both Child and Family Status and System Performance. The exit criteria for system performance include meeting or exceeding 85% on the overall System Performance indicator and 70% on the core System Performance indicators for two successive years.

While the important progress on the Child and Family Status indicators should be encouraging, there is still important work to be done; not only in demonstrating continued acceptable performance for two successive years, but also in attending to the critical domain of system performance. Progress in the system performance domain must accelerate and become more consistent. There is an important reason that the exit criteria for the Plan and the consent decree address both child and family status and system performance, not child and family status alone. Essentially, the reasoning comprises a long-term view of successful child welfare practice.

As noted earlier in this report, some indicators of child and family status respond fairly quickly to diligent efforts to improve practice, while others change more slowly and with greater

difficulty. The fact that these other indicators require more effort to change reflects the fact that they entail deeper and more enduring issues. For example, safety for a teenager may improve immediately when the youngster is removed from a dangerous home environment. It is a considerably more formidable task to either meet the needs in the home that result in the danger or find a permanent family home that will meet all of a teenager's needs for enduring relationships and support. It is important for child welfare systems to be able to meet the basic needs of children for safety and shelter; but it is ultimately as important to attend to the more difficult needs for enduring, committed family relationships. Otherwise, the systems find themselves dealing with the same children and families over and over again, and often dealing with "collateral damage" from well-meaning interventions that inadvertently result in the loss of sibling relationships and a sense of family and culture. A related concern has to do with adolescents who age out of the system (albeit safely) without close connections with family or any reliable permanent network of support.

The evidence suggests that child welfare practice in the Eastern Region has improved to the point that a number of the basic needs of the majority of the children in the sample reviewed are being met reasonably well. The evidence also is clear that work remains to be done in addressing some of the more difficult needs. Almost all of the children reviewed were safe at the time of the review, but fully a quarter of the children had inadequate prospects for a permanent family home and the relationships that go with being a permanent part of the family. Similarly, better than 90% of the children reviewed had an adequate placement, but more than a third had families whose functioning and resourcefulness was not adequate to care for the children safely and independently. Emotional and behavioral well-being for the children reviewed lagged considerably behind health and physical well-being.

The point of requiring exit criteria for system performance is to encourage the development of the child welfare system with practice principles, and resources and practice skills to not only respond to crises in child safety, but to help ensure that children are connected to families that can keep them safe. This capacity is developing in Utah's child welfare system, but it is not there yet. When the Division demonstrates system performance in accord with the exit criteria, the evidence will be seen not only in the System Performance indicators, but also in the more challenging Child and Family Status indicators such as prospects for permanence, emotional and behavioral well-being, and family resourcefulness.

The specific recommendations that follow are, to a large extent, known by the Division. The QCR report produced by the Child Welfare Group in 1997, as a part of its working support of the former monitoring panel, identified many of the practice issues reflected in the review of the Eastern Region. These findings were employed in the development of the Plan and a number of them are part of the Practice Model and the plan for improved training for workers and supervisors. The Eastern Region QCR reports issued in August of 2000 and July of 2001 provided further feedback and recommendations. Such strategic planning and practice guidance has been amplified in the Child Welfare Group's compliance report to the federal court each year.

Policy

While the Plan assumes that policy will be developed to express the practices required by the Practice Model, written policy revisions have not been completed. It has been noted in several reports that the following practices were not given sufficient emphasis in current Division policy and will require the communication that new and different performance is an expectation. *The long delay in developing policy that supports and is consistent with the Practice Model is an impediment to progress. It is likely that Eastern Region and other regions would see improvements in System Performance indicators if there were policy that was consistent with the Practice Model.* Immediate attention should be given to developing policy that sets out expectations for the following:

- Meaningful child and family participation in decision-making.
- Attention to and employment of child and family strengths in case planning.
- The routine use of family team conferences to facilitate family engagement and input, and to create and sustain a service team.
- Reliance on a service team for assessment, case planning, service coordination, tracking progress, and adapting the case planning.
- Attention to underlying needs and conditions in the family to produce assessments that are functional and useful in crafting effective interventions.
- Development of service plans that incorporate the family's input, utilize the assessments available, reflect the service team's contributions, are individualized, anticipate crucial transitions, and are employed as a functional case tool that guides actions in the case. The functioning of the SAFE system needs to be examined to determine its role in the tendency for plans not to reflect current events and intentions.
- Routine attention by workers and supervisors to plan implementation, timeliness, and the reliability of promised contributions by team members (including the family).
- Attention to the progress made by the family and the contributions of team members toward case planning goals and, when needed, modification of plans to adapt to new circumstances. Perhaps most importantly, policy should communicate the expectations for the worker to do "whatever it takes" to achieve the goal for the child and family. Performance expectations and program policy should assist workers in seeing their own accountability in achieving case goals, which will necessitate support for flexibility, creative solutions, and persistent effort.
- One additional policy and procedural step that is recommended relates to mitigating the demands of the Office of Recovery Services for past child support, especially for children who have been placed in care previously. In several regions, parents struggled to meet current needs due to the amount of support owed. Workers seem to be unaware that there are procedures that permit these obligations to be made more reasonable. Both policy and education and training would be helpful.

Flexible Funds/Resources

The Division needs to fully implement its flexible funds commitment to permit effective implementation of the Practice Model. There are significant resource limitations in the region related to support for children with behavioral problems. Because it is difficult to recruit "programs" to the region, the availability of flexible funds would permit better tailoring of supports for children with special needs -- often obviating the need for children to be placed

great distances from families. Beyond the ready availability of flexible funds to develop individualized services and supports for children and families, attention also needs to focus on the effects of funding erosion on the ability of the Division to make steady progress in accord with the Plan and consent decree. *There is increasing evidence that the Division's ability to make progress is eroding due to the steady pace of budget restrictions and outright reductions. The ability to provide timely policy revisions, support high-quality ongoing training, and maintain caseloads and supervision loads consistent with implementing the Practice Model appears to be diminished.*

Local Practice

The Eastern Region has been a leader in taking responsibility locally for implementing the Plan, in learning from and using the findings of the previous QCRs, and in making the quality of practice a priority. The following steps are recommended based on the current review:

- Distribute a copy of this report to each worker and supervisor. Copies of all case stories should be distributed to all supervisors at a minimum. Devote a staff meeting to the areas needing attention. Supervisors should be asked to devote unit meetings to the practice challenges identified and, on a case-by-case basis, provide feedback to workers about performance in relation to the expectations of the QCR protocol. Particular emphasis should be given to regularly convening the full child and family team to assess, plan, problem-solve, and coordinate.
- Continue to refine worker skills in developing and utilizing child and family team meetings through coaching and mentoring by supervisors and others with a clear vision about the role and function of the family team meetings as "the place where work gets done." Focus on the central role of the family in assembling the team, planning, updating assessments, and evaluating results.
- Continue to reinforce the understanding that functional assessments and long-term view are evolving processes, rather than static products. Long-term views can help to frame meetings by developing and checking out agreement about "What the situation will look like when the child and family are ready to function safely, independent of the Division, and what steps it will take to get there." Assessing the progress along this path will help the team hold its members accountable, track and adapt services and strategies, and update its functional assessment.
- Set clear expectations for providers regarding their role and responsibility as team members. There is some tendency for some providers to want to function as case managers, which should be discouraged. Similarly, providers should not be setting policies about visitation with family or other important contacts for children in care. Family contact is a right, not a privilege.
- Supervisors, with the help of their staff, should be asked to develop a simple plan for improving their unit's performance on key practice categories. Managers should assess the implementation and effectiveness of unit plans.
- Continue efforts with the recruitment of additional foster homes and structured homes. This will require financial support from the Division. Special attention and priority should be placed on the recruitment and retention of culturally appropriate placements for Native American children.

Eastern Region Report

- Develop a workgroup, perhaps with external resource persons, to address strategies related to working with Native American tribes. A particular concern is finding a way to reach agreement about how to ensure stability and permanence for Native American children that is responsive both to cultural values and the expectations incumbent upon the Division through federal and state law. This may involve a continuing series of discussions with both tribal social services and the tribal courts.

Appendix--Milestone Trend Indicators

1. Number and percent of home-based child clients who came into out-of-home care within 12 months of home-based case closure.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	33	7%	40	8%	22	5%	18	4%	19	6%
Salt Lake	49	8%	24	3%	39	5%	25	5%	23	4%
Western	15	7%	17	7%	19	8%	18	7%	9	5%
Eastern	10	7%	10	8%	9	6%	10	8%	6	3%
Southwest	0	0%	4	5%	1	1%	1	1%	3	3%
State	107	7%	95	5%	90	5%	72	5%	60	5%

2. Number and percent of children in out-of-home care who were victims of substantiated allegations of abuse and neglect by out-of-home parents, out-of-home care siblings, or residential staff.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	1	0.2%	1	0.2%	7	1.0%	2	0.4%	2	0.4%
Salt Lake	4	0.3%	2	0.2%	5	0.4%	4	0.3%	5	0.4%
Western	1	0.4%	4	1.4%	3	0.8%	1	0.4%	0	0.0%
Eastern	1	0.4%	0	0.0%	0	0.0%	4	1.5%	0	0.0%
Southwest	2	1.6%	0	0.0%	1	0.8%	5	4.1%	0	0.0%
State	9	0.4%	7	0.3%	16	0.6%	16	0.6%	8	0.3%

3. Number and percent of substantiated child victims with a prior home-based or out-of-home care case within the last 12 months.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	66	9%	56	9%	50	8%	62	9%	49	8%
Salt Lake	60	6%	93	8%	69	6%	64	5%	100	8%
Western	23	8%	14	5%	29	8%	13	3%	27	8%
Eastern	15	12%	10	6%	9	7%	9	6%	10	6%
Southwest	14	6%	19	12%	9	4%	12	6%	9	5%
State	178	8%	192	8%	166	7%	160	6%	194	7%

4. Number and percent of substantiated child victims with a prior CPS substantiated allegation within the last 12 months.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	110	16%	95	16%	67	11%	93	14%	80	13%
Salt Lake	119	11%	137	11%	148	12%	158	12%	191	14%
Western	27	9%	38	13%	51	14%	46	12%	40	11%
Eastern	24	19%	16	10%	10	8%	22	15%	13	8%
Southwest	20	6%	17	10%	17	8%	22	12%	19	10%
State	300	13%	303	13%	293	12%	341	13%	342	13%

5. Number and percent of children in custody for at least one year that attained permanency through custody termination prior to 24 months of custody.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	24	63%	17	65%	22	69%	30	60%	22	76%
Salt Lake	55	53%	51	50%	53	58%	53	61%	72	62%
Western	4	36%	6	67%	12	60%	17	77%	13	62%
Eastern	6	32%	11	92%	6	40%	7	47%	6	40%
Southwest	4	44%	3	60%	5	38%	1	33%	0	0%
State	93	52%	88	57%	98	57%	108	61%	113	61%

6. Number and percent of children who entered out-of-home care who attained permanency through custody termination within one year.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	139	83%	115	77%	103	76%	102	71%	83	78%
Salt Lake	265	70%	156	66%	113	60%	92	49%	88	54%
Western	37	64%	27	61%	31	53%	43	75%	31	70%
Eastern	38	72%	25	57%	21	60%	25	52%	31	66%
Southwest	18	86%	18	58%	15	75%	24	75%	17	68%
State	497	73%	341	68%	283	64%	286	61%	250	65%

7. Number and percent of children with prior custody episodes within 6, 12, and 18 months.

		1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	6 mos	97	91%	125	92%	114	87%	100	85%	112	92%
	12 mos	94	88%	112	83%	107	82%	98	83%	109	89%
	18 mos	90	84%	111	82%	102	78%	93	79%	107	88%
Salt Lake	6 mos	157	96%	182	92%	167	94%	169	98%	164	95%
	12 mos	140	86%	174	88%	160	90%	153	88%	157	91%
	18 mos	149	91%	168	85%	157	89%	151	87%	156	91%

Eastern Region Report

Western	6 mos	41	93%	54	98%	53	98%	41	91%	76	99%
	12 mos	41	93%	50	91%	52	96%	38	84%	75	97%
	18 mos	40	91%	49	89%	50	93%	38	84%	75	97%
Eastern	6 mos	41	87%	52	96%	49	96%	37	95%	36	88%
	12 mos	35	74%	50	93%	47	92%	36	92%	34	83%
	18 mos	34	72%	50	93%	45	88%	34	87%	34	83%
Southwest	6 mos	24	96%	26	90%	22	92%	21	95%	43	96%
	12 mos	24	96%	25	86%	22	88%	21	95%	43	96%
	18 mos	23	92%	25	86%	18	75%	20	91%	40	89%
State	6 mos	359	93%	437	93%	392	92%	371	93%	431	94%
	12 mos	348	90%	410	88%	375	88%	349	87%	418	92%
	18 mos	335	87%	402	86%	360	85%	339	85%	412	90%

8. Average months in care of cohorts of children in out-of-home care by goal, ethnicity, and sex. Workers have 45 days to establish a goal and enter it in SAFE. Cases that were closed prior to a goal being established are not reported under this trend.

Average length of stay of children in custody by goal.

	1st QT 2001	2nd QT 2001	3rd QT 2001	4th QT 2001	1st QT 2002
Adoption					
Northern	18	19	24	18	14
Salt Lake	19	31	23	26	21
Western	21	17	19	18	10
Eastern	34	26	0	41	17
Southwest	7	15	16	24	11
State	18	25	23	23	18
Guardianship					
Northern	22	19	27	3	0
Salt Lake	18	14	21	22	23
Western	59	20	5	42	10
Eastern	16	6	14	0	0
Southwest	17	0	0	6	5
State	28	14	22	22	17
Independent living					
Northern	35	19	26	41	49
Salt Lake	29	46	37	31	42
Western	36	44	23	12	42
Eastern	10	26	15	10	25
Southwest	18	12	73	15	0
State	30	36	33	26	43
Permanent foster care					
Northern	21	28	27	32	25
Salt Lake	47	38	32	56	36
Western	48	18	34	30	66
Eastern	35	47	27	19	26
Southwest	37	6	26	49	0
State	41	33	30	38	36

Eastern Region Report

Return home					
Northern	12	11	8	9	8
Salt Lake	13	14	11	10	11
Western	10	9	9	10	6
Eastern	11	5	10	8	8
Southwest	7	8	11	7	6
State	12	11	10	9	9

Average length of stay of children in custody by ethnicity.

	1st QT 2001	2nd QT 2001	3rd QT 2001	4th QT 2001	1st QT 2002
African American					
Northern	3	25	6	24	12
Salt Lake	27	36	19	29	32
Western	52	3	7	3	0
Eastern	0	0	0	0	0
Southwest	0	0	0	29	0
State	19	55	20	25	30
American Indian/Alaska Native					
Northern	4	0	24	23	0
Salt Lake	11	23	16	21	17
Western	11	21	10	1	9
Eastern	27	32	11	2	19
Southwest	30	11	0	0	0
State	21	28	10	16	17
Asian					
Northern	9	36	0	0	73
Salt Lake	7	19	0	0	13
Western	0	0	0	0	57
Eastern	0	0	0	0	0
Southwest	0	0	0	0	0
State	6	26	0	0	31
Caucasian					
Northern	9	10	9	9	20
Salt Lake	20	23	20	24	25
Western	22	11	13	12	28
Eastern	17	11	10	18	12
Southwest	12	8	19	14	4
State	21	22	21	17	21
Hispanic					
Northern	7	8	9	9	7
Salt Lake	14	14	16	12	15
Western	9	5	4	19	7
Eastern	6	3	4	4	12
Southwest	5	8	16	6	0
State	11	10	14	11	12

Eastern Region Report

Other/Unknown					
Northern	10	9	11	6	7
Salt Lake	9	11	14	10	12
Western	18	12	9	11	15
Eastern	5	0	5	13	10
Southwest	11	3	48	12	5
State	14	9	9	9	10
Pacific Islander					
Northern	0	31	0	16	0
Salt Lake	17	18	4	8	0
Western	0	0	0	0	0
Eastern	0	38	0	0	0
Southwest	0	0	0	0	0
State	17	14	2	17	0

Average number of months children are in custody by sex.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Northern	8	9	10	11	9	9	9	9	12	10
Salt Lake	16	16	22	18	17	18	17	20	21	17
Western	16	21	10	13	13	10	12	13	24	13
Eastern	21	9	21	8	8	9	10	15	10	13
Southwest	13	11	8	6	12	14	13	14	5	4
State	14	14	15	14	13	12	14	14	18	13

9. Percent of CPS investigations initiated within the time period mandated by state or local statute, regulation, or policy.

	Priority	1st QT 2001	2nd QT 2001	3rd QT 2001	4th QT 2001	1st QT 2002
Northern	1	100%	50%	100%	100%	100%
	2	92%	94%	88%	88%	89%
	3	75%	80%	82%	77%	72%
Salt Lake	1	92%	93%	86%	87%	95%
	2	87%	92%	89%	88%	90%
	3	71%	71%	74%	73%	69%
Western	1	100%	86%	100%	86%	96%
	2	87%	91%	88%	83%	89%
	3	58%	61%	65%	55%	55%
Eastern	1	79%	80%	88%	79%	100%
	2	91%	85%	93%	89%	89%
	3	84%	87%	92%	93%	90%
Southwest	1	95%	80%	100%	100%	100%
	2	90%	85%	88%	92%	91%
	3	75%	85%	87%	86%	88%
State	1	93%	88%	92%	86%	96%
	2	89%	92%	89%	88%	90%
	3	70%	74%	77%	74%	71%

10. Percent of children experiencing fewer than three placement changes within an out-of-home care service episode. (Methodology was changed in the 1st quarter of FY02 to report only placement changes in a child's residence rather than changes in levels of service within the same out-of-home provider.)

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern		70%		65%		66%		71%	108	73%
Salt Lake		43%		46%		48%		49%	140	55%
Western		67%		65%		56%		69%	55	65%
Eastern		72%		74%		73%		64%	30	57%
Southwest		47%		68%		72%		53%	21	66%
State		54%		59%		58%		60%	354	62%

11. Number and percent of children in placement by order of restrictiveness. Point-in-time: last day of the report period.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Residential treatment										
Northern	34	8%	29	7%	26	6%	27	7%	27	7%
Salt Lake	99	9%	102	9%	101	9%	109	10%	110	10%
Western	16	7%	21	10%	19	8%	18	8%	19	9%
Eastern	19	9%	22	10%	23	10%	18	8%	21	10%
Southwest	5	5%	6	6%	6	6%	4	4%	7	6%
State	173	9%	180	9%	175	8%	176	9%	184	9%
Group home										
Northern	9	2%	9	2%	14	3%	8	2%	9	2%
Salt Lake	63	6%	65	6%	58	5%	55	5%	53	5%
Western	5	2%	8	4%	6	3%	7	3%	6	3%
Eastern	4	2%	8	4%	6	3%	4	2%	5	2%
Southwest	3	3%	3	3%	3	3%	2	2%	5	4%
State	84	4%	93	4%	87	4%	76	4%	78	4%
Treatment foster homes										
Northern	111	25%	111	26%	115	27%	114	29%	117	29%
Salt Lake	259	24%	238	22%	229	21%	211	20%	221	21%
Western	60	27%	69	31%	86	37%	81	38%	67	31%
Eastern	71	33%	68	31%	74	33%	76	34%	77	36%
Southwest	32	34%	38	40%	38	40%	46	45%	55	46%
State	533	26%	524	26%	542	26%	528	26%	537	27%
Family foster home										
Northern	236	54%	232	54%	231	55%	212	53%	233	57%
Salt Lake	537	51%	574	53%	572	53%	572	54%	559	52%
Western	133	60%	112	51%	113	48%	90	42%	106	50%
Eastern	117	54%	114	53%	114	51%	122	54%	108	51%
Southwest	50	53%	47	49%	47	50%	49	47%	47	38%
State	1073	53%	1079	53%	1077	53%	1045	52%	1053	52%

Eastern Region Report

Other											
Northern	47	11%	50	12%	36	9%	41	11%	28	7%	
Salt Lake	109	10%	102	9%	117	11%	122	11%	132	12%	
Western	9	4%	11	5%	10	4%	18	8%	15	7%	
Eastern	3	2%	5	2%	7	3%	8	4%	5	5%	
Southwest	4	4%	1	1%	1	1%	4	4%	9	7%	
State	172	9%	169	8%	171	9%	193	10%	189	9%	

12. Number and percent of all children younger than five years exiting custody in year who were in care longer than six months. (Data is by case closure reason.)

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Adoption final										
Northern	14	58%	29	81%	12	57%	10	36%	11	61%
Salt Lake	22	55%	35	69%	33	61%	21	50%	26	63%
Western	1	17%	9	64%	9	60%	10	71%	2	25%
Eastern	0	0%	9	90%	2	50%	2	100%	3	38%
Southwest	2	22%	3	50%	0	0%	1	25%	3	100%
State	39	48%	85	73%	56	60%	44	49%	45	58%
Custody returned to parent										
Northern	9	38%	5	14%	7	33%	16	57%	7	39%
Salt Lake	13	33%	11	22%	16	30%	16	38%	12	29%
Western	5	83%	4	29%	1	7%	2	14%	4	50%
Eastern	1	50%	1	10%	2	50%	0	0%	4	50%
Southwest	7	78%	1	17%	0	0%	2	50%	0	0%
State	35	43%	22	19%	26	28%	36	40%	27	35%
Custody returned to relative/guardian										
Northern	1	4%	1	3%	2	10%	2	7%	0	0%
Salt Lake	4	10%	5	10%	5	9%	5	12%	3	7%
Western	0	0%	1	7%	5	33%	2	14%	2	25%
Eastern	0	0%	0	0%	0	0%	0	0%	1	13%
Southwest	0	0%	2	33%	0	0%	1	25%	0	0%
State	5	6%	9	8%	12	13%	10	11%	6	8%
Custody to foster parent										
Northern	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake	0	0%	0	0%	0	0%	0	0%	0	0%
Western	0	0%	0	0%	0	0%	0	0%	0	0%
Eastern	1	50%	0	0%	0	0%	0	0%	0	0%
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%
State	1	1%	0	0%	0	0%	0	0%	0	0%
Death										
Northern	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake	1	3%	0	0%	0	0%	0	0%	0	0%
Western	0	0%	0	0%	0	0%	0	0%	0	0%
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%
State	1	1%	1	1%	0	0%	0	0%	0	0%

13. Number and percent of all children exiting custody in year who were in care longer than six months. (Data is by case closure reason.)

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Adoption final										
Northern	22	40%	38	50%	22	37%	24	35%	17	32%
Salt Lake	29	17%	5	34%	45	32%	35	30%	38	28%
Western	2	6%	13	34%	9	32%	14	35%	2	5%
Eastern	1	4%	10	40%	2	12%	3	14%	5	17%
Southwest	2	10%	4	24%	1	14%	3	21%	3	43%
State	56	18%	70	37%	79	30%	79	31%	65	24%
Emancipation										
Northern	8	14%	9	12%	4	7%	5	7%	14	26%
Salt Lake	26	15%	24	16%	13	10%	26	23%	20	15%
Western	12	33%	4	11%	2	7%	3	8%	8	19%
Eastern	4	15%	6	24%	4	24%	5	24%	4	14%
Southwest	3	14%	1	6%	3	43%	1	7%	0	0%
State	53	17%	44	14%	26	9%	40	16%	46	17%
Returned to parent										
Northern	18	31%	17	22%	21	36%	32	47%	17	32%
Salt Lake	82	49%	47	32%	51	36%	42	37%	49	36%
Western	13	36%	14	37%	5	18%	14	35%	16	37%
Eastern	14	54%	4	16%	8	47%	7	33%	11	38%
Southwest	15	71%	7	41%	2	29%	9	64%	4	57%
State	142	46%	89	28%	87	34%	104	40%	97	36%
Custody to relative/guardian										
Northern	7	12%	6	8%	9	15%	4	5%	4	8%
Salt Lake	13	8%	12	8%	14	10%	8	7%	20	15%
Western	5	14%	6	16%	11	39%	8	20%	10	23%
Eastern	2	8%	1	4%	3	18%	3	14%	7	24%
Southwest	1	5%	5	29%	0	14%	1	7%	0	0%
State	28	9%	30	10%	37	15%	24	9%	41	41%
Custody to youth corrections										
Northern	1	2%	4	5%	0	0%	3	4%	0	0%
Salt Lake	12	7%	4	3%	10	7%	2	2%	6	4%
Western	2	6%	0	0%	0	0%	1	3%	4	9%
Eastern	3	12%	1	4%	0	0%	2	10%	1	4%
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%
State	18	6%	9	3%	10	4%	8	3%	11	4%
Custody to foster parent										
Northern	1	2%	0	0%	0	0%	0	0%	1	2%
Salt Lake	4	2%	8	5%	7	5%	2	2%	0	0%
Western	2	6%	0	0%	0	0%	0	0%	3	7%
Eastern	2	8%	3	12%	0	0%	1	5%	1	4%
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%
State	9	3%	11	4%	7	3%	3	1%	5	2%

Eastern Region Report

Death											
Northern	0	0%	1	1%	0	0%	0	0%	0	0%	
Salt Lake	1	1%	0	0%	0	0%	0	0%	0	0%	
Western	0	0%	0	0%	0	0%	0	0%	0	0%	
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%	
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	
State	1	0%	1	0%	0	0%	0	0%	0	0%	
Non-petitional release											
Northern	1	2%	0	0%	1	5%	0	0%	0	0%	
Salt Lake	0	0%	2	1%	1	1%	0	0%	4	3%	
Western	0	0%	1	3%	0	0%	0	0%	0	0%	
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%	
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	
State	1	0%	3	1%	2	2%	0	0%	4	2%	
Petition											
Northern	0	0%	0	0%	0	0%	0	0%	0	0%	
Salt Lake	0	0%	1	1%	0	0%	0	0%	0	0%	
Western	0	0%	0	0%	0	0%	0	0%	0	0%	
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%	
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	
State	0	0%	1	0%	0	0%	0	0%	0	0%	
Denied											
Northern	0	0%	0	0%	0	0%	0	0%	0	0%	
Salt Lake	0	0%	0	0%	0	0%	0	0%	0	0%	
Western	0	0%	0	0%	1	4%	0	0%	0	0%	
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%	
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	
State	0	0%	0	0%	1	0%	0	0%	0	0%	
Voluntary custody terminated											
Northern	0	0%	1	1%	0	0%	0	0%	0	0%	
Salt Lake	1	1%	0	0%	0	0%	0	0%	0	0%	
Western	0	0%	0	0%	0	0%	0	0%	0	0%	
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%	
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	
State	1	0%	1	0%	0	0%	0	0%	0	0%	

14. Number and percent of children age 18 years or older, exiting care by education level.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Attending school										
Northern			DATA NOT AVAILABLE UNTIL 1st QUARTER 2002						3	23%
Salt Lake									12	46%
Western									1	14%
Eastern									0	0%
Southwest									0	0%
State									16	31%

Eastern Region Report

Graduated										
Northern									0	0%
Salt Lake									3	12%
Western									1	14%
Eastern									0	0%
Southwest									0	0%
State									4	8%
Not in school										
Northern									1	8%
Salt Lake									1	4%
Western									0	0%
Eastern									0	0%
Southwest									0	0%
State									2	4%
Blank										
Northern									9	69%
Salt Lake									10	38%
Western									5	71%
Eastern									5	100%
Southwest									0	0%
State									29	57%

15. Number of children in custody who are legally freed for adoption and the percent who are placed in an adoptive home within six months.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern									25	56%
Salt Lake			DATA NOT AVAILABLE UNTIL 1st QUARTER 2002						74	32%
Western									2	0%
Eastern									0	0%
Southwest									8	88%
State									109	41%

16. Number and percent of adoption placements that disrupt before finalization.

	1st QT 2001		2nd QT 2001		3rd QT 2001		4th QT 2001		1st QT 2002	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Northern	2	2%	1	1%	1	2%	1	2%	2	3.92%
Salt Lake	6	4%	4	2%	1	1%	1	1%	0	0%
Western	1	3%	0	0%	0	0%	0	0%	0	0%
Eastern	0	0%	0	0%	0	0%	0	0%	1	7.14%
Southwest	0	0%	0	0%	0	0%	0	0%	1	1.09%
State	9	3%	5	2%	2	1%	2	1%	4	2.27%